

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000124140

FILED
Feb 19, 2009
Secretary of State

Entity Name: CLAUDIA FULLER CLEANING LLC

Current Principal Place of Business:

646 OLYMPIC DR
OCOE, FL 34761

New Principal Place of Business:

97 BEACON POINT BLVD
OCOE, FL 34761

Current Mailing Address:

646 OLYMPIC DR
OCOE, FL 34761

New Mailing Address:

97 BEACON POINT BLVD
OCOE, FL 34761

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FULLER, CLAUDIA
646 OLYMPIC DR
OCOE, FL 34761 US

Name and Address of New Registered Agent:

FULLER, CLAUDIA
97 BEACON POINT BLVD
OCOE, FL 34761 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

02/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FULLER, CLAUDIA M
Address: 646 OLYMPIC DR
City-St-Zip: OCOE, FL 34761

Title: MGRM () Delete
Name: FULLER, KELLY M
Address: 646 OLYMPIC DR
City-St-Zip: OCOE, FL 34761

Title: MGRM () Delete
Name: DELGADILLO, LAVRA H
Address: 646 OLYMPIC DR
City-St-Zip: OCOE, FL 34761

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FULLER, CLAUDIA M
Address: 97 BEACON POINT BLVD
City-St-Zip: OCOE, FL 34761

Title: MGRM (X) Change () Addition
Name: FULLER, KELLY M
Address: 97 BEACON POINT BLVD
City-St-Zip: OCOE, FL 34761

Title: MGRM (X) Change () Addition
Name: DELGADILLO, LAURA M
Address: 97 BEACON POINT BLVD
City-St-Zip: OCOE, FL 34761

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CLAUDIA M. FULLER

MGRM

02/19/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date