2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# L08000002617

Entity Name: AIV STUCCO, LLC

Current Principal Place of Business:

1591 LANE AV
STE 106G
JACKSONVILLE, FL 32210

New Principal Place of Business:

3629 CAROLINE VALE BLVD
JACKSONVILLE, FL 32277

Current Mailing Address:

1591 LANE AV
STE 106G
JACKSONVILLE, FL 32210

New Mailing Address:

3629 CAROLINE VALE BLVD
JACKSONVILLE, FL 32277

FEI Number: 20-2566249 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COLLEGE, TAX & RETIREMENT STRATEGIES, LLC
3110 SPRING GLEN ROAD
JACKSONVILLE, FL 32207 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGMR ( ) Delete
Name: ABRAMYK, IHOR V
Address: 1591 LANE AV, STE 106G
City-St-Zip: JACKSONVILLE, FL 32210

ADDITIONS/CHANGES:

Title: MGMR (X) Change ( ) Addition
Name: ABRAMYK, IHOR V
Address: 3629 CAROLINE VALE BLVD
City-St-Zip: JACKSONVILLE, FL 32277

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: IHOR ABRAMYK MGRM 04/21/2009

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