

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000005984

FILED
Mar 19, 2009
Secretary of State

Entity Name: ANTHONY MITCHELL & ASSOCIATES, LLC

Current Principal Place of Business:

743 RANDALL ROBERTS RD
FORT WALTON BEACH, FL 32547

New Principal Place of Business:

Current Mailing Address:

743 RANDALL ROBERTS RD
FORT WALTON BEACH, FL 32547

New Mailing Address:

FEI Number: 26-1771155

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MITCHELL, ANTHONY L
743 RANDALL ROBERTS RD
FORT WALTON BEACH, FL 32547 US

Name and Address of New Registered Agent:

MITCHELL, MONICA E
743 RANDALL ROBERTS RD
FORT WALTON BEACH, FL 32547 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: MONICA E. MITCHELL

03/19/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MITCHELL, ANTHONY L
Address: 743 RANDALL ROBERTS RD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: MGR () Delete
Name: ESTADE, MONICA A
Address: 360 PHARR RD, NE #301
City-St-Zip: ATLANTA, GA 30305

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: MITCHELL, MONICA E
Address: 828 SECOND STREET
City-St-Zip: NEW ORLEANS, LA 70130

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: MONICA E. MITCHELL

MGR

03/19/2009

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