2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000006950

Entity Name: FIVE FIFTHS LLC

FILED Mar 12, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 110 WOODKNOLL PL. VALRICO, FL 33594 US **Current Mailing Address: New Mailing Address:** 110 WOODKNOLL PL. VALRICO, FL 33594 US FEI Number: 26-2001297 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ABU, AZIMEYE O 110 WOODKNOLL PL. VALRICO, FL 33594 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete ABU, AZIMEYE O Name: Name: 110 WOODKNOLL PL. Address: Address: City-St-Zip: VALRICO, FL 33594 US City-St-Zip: Title: MGR () Delete Title: (X) Change () Addition MGR METZGER, WALWIN Name: METZGER, WALWIN Name: Address: 6750 WHITE BLOSSOM CIRCLE Address: 3030 NW 68TH STREET #206 City-St-Zip: JACKSONVILLE, FL 32258 US City-St-Zip: FORT LAUDERDALE, FL 33309 US Title: MGR () Delete Title: () Change () Addition HILL, WILLIE M JR. Name: Name: 5748 REMINGTON CIRCLE #2016 Address: Address: City-St-Zip: FORT WORTH, TX 76132 US City-St-Zip: () Delete Title: MGR Title: MGR (X) Change () Addition CUSSEAUX, ALLEN JR. Name: Name: ABU, IGBETSAPE A 1908 E. SHADOWLAWN AVE. 591 NORTHBRIDGE DRIVE Address: Address: City-St-Zip: TAMPA, FL 33610 US City-St-Zip: ALTAMONTE SPRINGS, FL 32714 US Title: MGR () Delete Title: (X) Change () Addition ABU, IGBETSAPE A MCKENZIE, LLOYD Name: Name: 7990-1128 BAYMEADOWS ROAD EAST 780 WILDBRIAR ROAD NE #205 Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 US City-St-Zip: PALM BAY, FL 32905 US Title: (X) Delete Title: () Change () Addition MCKENZIE, LLOYD Name: Name: Address: 780 WILDBRIAR ROAD NE #205 Address: PALM BAY, FL 32905 US City-St-Zip: City-St-Zip:

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: AZIMEYE O. ABU MGR 03/12/2009