

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000012860

Entity Name: HOWGRAT GODART, LLC

FILED
Feb 22, 2009
Secretary of State

Current Principal Place of Business:

13371 N. E. 17TH AVENUE
TRENTON, FL 32693 US

New Principal Place of Business:

13231 NE 18TH TERRACE
TRENTON, FL 32693 US

Current Mailing Address:

13371 N. E. 17TH AVENUE
TRENTON, FL 32693 US

New Mailing Address:

13231 NE 18TH TERRACE
TRENTON, FL 32693 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEIST, GREG A
13371 N. E. 17TH AVENUE
TRENTON, FL 32693 US

Name and Address of New Registered Agent:

DEIST, GREGORY A
13231 NE 18TH TERRACE
TRENTON, FL 32693 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: GREGORY DEIST

02/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DEIST, GREG A
Address: 13371 N. E. 17TH AVENUE
City-St-Zip: TRENTON, FL 32693 US

Title: MGRM () Delete
Name: DEIST, PAMELA C
Address: 13371 N. E. 17TH AVENUE
City-St-Zip: TRENTON, FL 32693 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DEIST, GREGORY A
Address: 13231 NE 18TH TERRACE
City-St-Zip: TRENTON, FL 32693 US

Title: MGRM (X) Change () Addition
Name: DEIST, PAMELA C
Address: 13231 NE 18TH TERRACE
City-St-Zip: TRENTON, FL 32693 US

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: GREGORY DEIST

MGRM

02/22/2009

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