

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000019335

Entity Name: MALCOLM HAYES CPA PLC

FILED
May 04, 2009
Secretary of State

Current Principal Place of Business:

503 W DRANE ST S
PLANT CITY, FL 33563

New Principal Place of Business:

503 SW DRANE ST
PLANT CITY, FL 33563

Current Mailing Address:

PO DRAWER BBB
PLANT CITY, FL 335649048 US

New Mailing Address:

PO BOX BBB
PLANT CITY, FL 335649048 US

FEI Number: 26-2028677 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HAYES, MALCOLM
503 W DRANE ST S
PLANT CITY, FL 33563 US

Name and Address of New Registered Agent:

HAYES, MALCOLM
503 SW DRANE ST
PLANT CITY, FL 33563 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: MALCOLM HAYES

05/04/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HAYES, MALCOLM
Address: PO DRAWER BBB
City-St-Zip: PLANT CITY, FL 335649048 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HAYES, MALCOLM
Address: PO BOX BBB
City-St-Zip: PLANT CITY, FL 335649048 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: MALCOLM HAYES

MGRM

05/04/2009

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