## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L08000020400

Entity Name: HERREN, LLC

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1837 CARILLON PARK DRIVE 1450 MANGO AVE OVIEDO, FL 32765 SARASOTA, FL 34237

Current Mailing Address: New Mailing Address:

1837 CARILLON PARK DRIVE 1450 MANGO AVE OVIEDO, FL 32765 SARASOTA, FL 34237

FEI Number: 80-0161299 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:

TIMOTHY J. COTTER, P.A. 599 9TH STREET NORTH #313 NAPLES, FL 34102 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:

Electronic Signature of Registered Agent Date

ADDITIONS/CHANGES:

Electronic Signature of Registered Ager

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MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete Title: MGRM ( X) Change ( ) Addition Name: HERREN, PAUL S Name: HERREN, PAUL S

Address: 1837 CARILLON PARK DRIVE Address: 1111 N GULFSTREAM AVE APT 10E

City-St-Zip: OVIEDO, FL 32765 City-St-Zip: SARASOTA, FL 34236

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

 Name:
 HERREN, NEIL D
 Name:
 HERREN, NEIL D

 Address:
 1837 CARILLON PARK DRIVE
 Address:
 1019 S OSPREY AVE

 City-St-Zip:
 OVIEDO, FL 32765
 City-St-Zip:
 SARASOTA, FL 34236

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: PAUL HERREN PRES 04/21/2009