

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000021605

Entity Name: MAPFLORIDA, LLC

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

945 BRUSH HILL RD.
MILTON, MA 02186

New Principal Place of Business:

Current Mailing Address:

945 BRUSH HILL RD.
MILTON, MA 02186

New Mailing Address:

FEI Number: 26-2133897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LIEBERMAN, ERIK R
227 NOKOMIS AVENUE S
VENICE, FL 34285 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: TESSIER, JOY
Address: 945 BRUSH HILL RD.
City-St-Zip: MILTON, MA 02186

Title: MGR () Delete
Name: PROCACCINO, MARY A
Address: 2045 TOCOBAGA LANE
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VOKE, JOY
Address: 945 BRUSH HILL RD.
City-St-Zip: MILTON, MA 02186

Title: () Change () Addition
Name:
Address:
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: JOY E VOKE

MGR

04/07/2009

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