

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000022927

Entity Name: BLACK INK ACCOUNTING LLC

FILED
Mar 31, 2009
Secretary of State

Current Principal Place of Business:

981 HWY 98 E
SUITE 3, #269
DESTIN, FL 32541

Current Mailing Address:

PO BOX 794
SHALIMAR, FL 32579

New Principal Place of Business:

1114 E JOHN SIMS PKWY
#317
NICEVILLE, FL 32578

New Mailing Address:

1114 E JOHN SIMS PKWY
#317
NICEVILLE, FL 32578

FEI Number: 45-0590443

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MANN, ANN
981 HWY 98 E
SUITE 3, #269
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

MANN, ANN
1114 E JOHN SIMS PKWY
#317
NICEVILLE, FL 32578 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: ANN MANN

03/31/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MANN, ANN
Address: PO BOX 794
City-St-Zip: SHALIMAR, FL 32579

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MANN, ANN
Address: 1114 E JOHN SIMS PKWY #317
City-St-Zip: NICEVILLE, FL 32578

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: ANN MANN

PRES

03/31/2009

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