## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L08000025108

MCPHERSON, TRICIA

6722 S. 34TH STREET

FRANKLIN, WI 53132 US

Name:

Address:

City-St-Zip:

Entity Name: PREMIER INVESTMENT CONCEPTS, LLC

FILED Apr 24, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8495 W. COMMERCIAL BLVD TAMARAC, FL 33351 **Current Mailing Address: New Mailing Address:** 8495 W. COMMERCIAL BLVD TAMARAC, FL 33351 FEI Number: 26-2155115 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: MCINTOSH, SHAWN A 8495 W. COMMERCIAL BLVD TAMARAC, FL 33351 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete MCINTOSH, SHAWN A Name: Name: 8841 COBBLESTONE POINT CIRCLE Address: Address: City-St-Zip: BOYNTON BEACH, FL 33472 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition TURNBULL, CLAUDE Name: Name: Address: 7925 NW 24TH STREET Address: City-St-Zip: MARGATE, FL 33063 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition CALDER, CEDRIC Name: Name: 115 GREENWOOD DR Address: Address: City-St-Zip: MILLBURN, NJ 07041 US City-St-Zip: Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition Name: LOPEZ, MICHAEL Name: MCPHERSON, TRICIA Address: 42 CEDAR ROAD Address: 6722 S. 34TH STREET City-St-Zip: WESTBURY, NY 11590 US City-St-Zip: FRANKLIN, WI 53132 US Title: MGRM (X) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: SHAWN A. MCINTOSH MGR 04/24/2009