

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000031084

FILED
Jun 10, 2009
Secretary of State

Entity Name: THE EGGCEPTIONAL DONOR GROUP LLC

Current Principal Place of Business:

3841 W. STATE RD. 84
#101
DAVIE, FL 33312

New Principal Place of Business:

Current Mailing Address:

3841 W. STATE RD. 84
#101
DAVIE, FL 33312

New Mailing Address:

FEI Number: 11-3838704 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:

GATINS, JENNIFER L
3841 W. STATE RD. 84
#101
DAVIE, FL 33312 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: GATINS, JENNIFER L
Address: 3841 W. STATE RD. 84 #101
City-St-Zip: DAVIE, FL 33312

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRS (X) Change () Addition
Name: GATINS, JENNIFER L
Address: 3841 W. STATE RD. 84 #101
City-St-Zip: DAVIE, FL 33312

Title: OFF () Change (X) Addition
Name: GATINS, DEMIAN P
Address: 3841 W. STATE RD. 84 #101
City-St-Zip: DAVIE, FL 33312

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: JENNIFER GATINS

PRS

06/10/2009

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