

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000033883

FILED  
May 06, 2009  
Secretary of State

Entity Name: ALL COACH SPORTS, LLC

**Current Principal Place of Business:**

1082 SW BAYSHORE BLVD  
PORT ST. LUCIE, FL 34983

**New Principal Place of Business:**

**Current Mailing Address:**

1082 SW BAYSHORE BLVD  
PORT ST. LUCIE, FL 34983

**New Mailing Address:**

FEI Number: 26-2288240      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:**

**Name and Address of New Registered Agent:**

RAYMOND, ANN  
1082 SW BAYSHORE BLVD  
PORT ST. LUCIE, FL 34983      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

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM      ( ) Delete  
Name: BIBER, JANET R  
Address: 1672 SE MISTLETOE STREET  
City-St-Zip: PORT ST. LUCIE, FL 34983

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR      ( ) Delete  
Name: RAYMOND, ANN  
Address: 1682 SE MISTLETOE STREET  
City-St-Zip: PORT ST. LUCIE, FL 34983

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR      ( ) Delete  
Name: RAYMOND, KENNETH  
Address: 1682 SE MISTLETOE STREET  
City-St-Zip: PORT ST. LUCIE, FL 34983

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: ANN RAYMOND

MGR

05/06/2009

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