2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2009
Secretary of State

DOCUMENT# L08000041450

Entity Name: CHASON & COMPANY, LLC

Current Principal Place of Business:

9203 SHOAL CREEK DRIVE
TALLAHASSEE, FL 32312

New Principal Place of Business:

9175 EAGLES RIDGE DRIVE
TALLAHASSEE, FL 32312

Current Mailing Address:

9203 SHOAL CREEK DRIVE
TALLAHASSEE, FL 32312

New Mailing Address:

9175 EAGLES RIDGE DRIVE
TALLAHASSEE, FL 32312

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMPSON, SUSAN S
3520 THOMASVILLE ROAD
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

THOMPSON, SUSAN S
3520 THOMASVILLE ROAD
4TH FLOOR
TALLAHASSEE, FL 32309 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: 01/15/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: CHASON, SANDRA B
Address: 9203 SHOAL CREEK DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: CHASON, SANDRA B
Address: 9175 EAGLES RIDGE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGRM ( ) Change (X) Addition
Name: CHASON, GILBERT M
Address: 9175 EAGLES RIDGE DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

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: SANDRA B CHASON MGRM 01/15/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date