

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000044139

**FILED**  
**Apr 17, 2009**  
**Secretary of State**

**Entity Name:** ENCOUNTERS, LLC

**Current Principal Place of Business:**

6614 ECTOR PLACE  
JACKSONVILLE, FL 32211

**New Principal Place of Business:**

3703 AMERICAN HOLLY ROAD  
JACKSONVILLE, FL 32226

**Current Mailing Address:**

6614 ECTOR PLACE  
JACKSONVILLE, FL 32211

**New Mailing Address:**

3703 AMERICAN HOLLY ROAD  
JACKSONVILLE, FL 32226

FEI Number: 26-2548900

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JOHNSON, JESSICA D  
6614 ECTOR PLACE  
JACKSONVILLE, FL 32211 US

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

JOHNSON, JESSICA D  
3703 AMERICAN HOLLY ROAD  
JACKSONVILLE, FL 32226 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: JESSICA D. JOHNSON

04/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: JOHNSON, JESSICA D  
Address: 6614 ECTOR PLACE  
City-St-Zip: JACKSONVILLE, FL 32211

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: JOHNSON, JESSICA D  
Address: 3703 AMERICAN HOLLY ROAD  
City-St-Zip: JACKSONVILLE, FL 32226

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: JESSICA D. JOHNSON

MGR

04/17/2009

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