

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000048944

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: PLAY SAFE AMERICA, LLC

## Current Principal Place of Business:

1741 GREENRIDGE CIRCLE SOUTH  
FRUIT COVE, FL 32259 US

## New Principal Place of Business:

724 QUEENS HARBOR BLVD  
JACKSONVILLE, FL 32225 US

## Current Mailing Address:

1741 GREENRIDGE CIRCLE SOUTH  
FRUIT COVE, FL 32259 US

## New Mailing Address:

724 QUEENS HARBOR BLVD  
JACKSONVILLE, FL 32225 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAKS BLVD.  
SUITE A-100  
TAMPA, FL 33612 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: MGRM ( ) Delete  
Name: JOHNSON, TIMMY  
Address: 1741 GREENRIDGE CIRCLE SOUTH  
City-St-Zip: FRUIT COVE, FL 32259 US

Title: MGRM ( ) Delete  
Name: JOHNSON, MICHELLE  
Address: 1741 GREENRIDGE CIRCLE SOUTH  
City-St-Zip: FRUIT COVE, FL 32259 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: JOHNSON, TIMMY  
Address: 724 QUEENS HARBOR BLVD  
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: MGRM (X) Change ( ) Addition  
Name: JOHNSON, MICHELLE  
Address: 724 QUEENS HARBOR BLVD  
City-St-Zip: JACKSONVILLE, FL 32225 US

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: TIMMY JOHNSON

MGRM

04/27/2009

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