

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000049785

FILED
Apr 01, 2009
Secretary of State

Entity Name: DAVIS, NORTHCUTT, SAING, LLC.

Current Principal Place of Business:

4821 SKATES CIRCLE
FORT MYERS, FL 33905 US

New Principal Place of Business:

Current Mailing Address:

4821 SKATES CIRCLE
FORT MYERS, FL 33905 US

New Mailing Address:

FEI Number: 26-2633821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, STEVEN M
4281 SKATES CIRCLE
FORT MYERS, FL 33905 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: DAVIS, STEVEN M
Address: 4281 SKATES CIRCLE
City-St-Zip: FORT MYERS, FL 33905 US

Title: MGR () Delete
Name: DAVIS, GEORGE L
Address: 106 WILLOW LANE
City-St-Zip: LEESBURG, FL 34748 US

Title: MGR () Delete
Name: DAVIS, DIANNE B
Address: 106 WILLOW LANE
City-St-Zip: LEESBURG, FL 34748 US

Title: MGR () Delete
Name: SAING, MICHELLE D
Address: 1190 FRASER PINE BLVD
City-St-Zip: SARASOTA, FL 34240 US

Title: MGR () Delete
Name: NORTHCUTT, CHRISTINE L
Address: 3336 RELAY RD
City-St-Zip: ORMOND BEACH, FL 32174 US

ADDITIONS/CHANGES:

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

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

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

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

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: STEVEN M DAVIS

MGR

04/01/2009

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