

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000051085

Entity Name: THE TRUTH LIES, L.L.C.

FILED
May 07, 2009
Secretary of State

Current Principal Place of Business:

2524 BLUE LAKE CT
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

2524 BLUE LAKE CT
APOPKA, FL 32703

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

SALFI, DOMINICK J
999 DOUGLAS AVE
STE 3324
ALTAMONTE SPRINGS, FL 32714 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: () Delete
Name:
Address:
City-St-Zip:

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: STONE, HANK MGR
Address: 1420 PLACE PICARDY
City-St-Zip: WINTER PARK, FL 32789

Title: MGRM () Change (X) Addition
Name: DUENSING, RANDY MGRM
Address: 1830 NW 51ST TERRACE
City-St-Zip: GAINESVILLE, FL 32605

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: HANK STONE

MGR

05/07/2009

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