2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000052172

WADE, MICHAEL

APOPKA, FL 32712 US

2586 PONKAN MEADOW DRIVE

Name:

Address:

City-St-Zip:

Entity Name: STR8ENDZ, LLC

FILED Mar 04, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
8471 BAYWOOD VISTA DRIVE ORLANDO, FL 32810 US				130 EAST ALTAMONTE DR		
ORLANDO), FL 32010	US		1450 ALATMONTE SPRINGS	S, FL 32701	US
Current Mailing Address:				New Mailing Address:		
8471 BAYWOOD VISTA DRIVE ORLANDO, FL 32810 US				130 EAST ALTAMONTE DR		
ORLANDO), FL 32810	US		1450 ALATMONTE SPRINGS	S, FL 32701	US
FEI Number:	26-2676706	FEI Number Applied For ()	FEI Nur	nber Not Applicable ()	Certificate of	Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
	HO WOOD VIST <i>A</i>), FL 32810	A DRIVE US				
	named entity of Florida.	submits this statement for th	ne purpose o	of changing its registered	office or regist	ered agent, or both,
SIGNATUF						
	Electro	onic Signature of Registered .	Agent		Date	
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	JAHO, AMAT) Delete OD VISTA DRIVE L 32810 US		Title: (Name: Address: City-St-Zip:) Change ()Ad	dition
Title:	MGR () Delete		Title: () Change()Ad	dition

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: AMAT JAHO MR 03/04/2009