

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000054423

FILED
Apr 28, 2009
Secretary of State

Entity Name: VEROPOLO, LLC

Current Principal Place of Business:

540 RADNOR DRIVE
PALM HARBOR, FL 34683 US

New Principal Place of Business:

4235 MANXCAT LANE
NEW PORT RICHEY, FL 34653 US

Current Mailing Address:

540 RADNOR DRIVE
PALM HARBOR, FL 34683 US

New Mailing Address:

PO BOX 1535
ELFERS, FL 34680 US

FEI Number: 26-2727984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DESAUTELS, VERONIQUE
540 RADNOR DRIVE
PALM HARBOR, FL 34683 US

Name and Address of New Registered Agent:

DESAUTELS, VERONIQUE
4235 MANXCAT LANE
NEW PORT RICHEY, FL 34653 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: VERONIQUE DESAUTELS

04/28/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DESAUTELS, VERONIQUE
Address: 540 RADNOR DRIVE
City-St-Zip: PAL HARBOR, FL 34683 US

Title: MGRM (X) Delete
Name: POLO, JUNIOR
Address: 540 RADNOR DRIVE
City-St-Zip: PALM HARBOR, FL 34683 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DESAUTELS, VERONIQUE
Address: 4235 MANXCAT LANE
City-St-Zip: NEW PORT RICHEY, FL 34653 US

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: VERONIQUE DESAUTELS

MGRM

04/28/2009

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