

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000062284

Entity Name: XTREME EXPRESSIONS, L.L.C.

FILED
Jan 09, 2009
Secretary of State

Current Principal Place of Business:

18901 NEW PASSAGE BLVD
LAND O LAKES, FL 34638

New Principal Place of Business:

Current Mailing Address:

18901 NEW PASSAGE BLVD
LAND O LAKES, FL 34638

New Mailing Address:

FEI Number: 26-2875127

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREDERICK, LARRY
18901 NEW PASSAGE BLVD
LAND O LAKES, FL 34638 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: FREDERICK, LARRY
Address: 18901 NEW PASSAGE BLVD
City-St-Zip: LAND O LAKES, FL 34638

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BENEVIDES, PETE
Address: PO BOX 120941
City-St-Zip: CLERMONT, FL 34712

Title: MGRM () Change (X) Addition
Name: FREDERICK, LARRY
Address: 18901 NEW PASSAGE BLVD
City-St-Zip: LAND O LAKES, FL 34638

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: LARRY FREDERICK

MGRM

01/09/2009

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