

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000062311

FILED
Apr 30, 2009
Secretary of State

Entity Name: SCOOTER CITY OF SARASOTA, LLC

Current Principal Place of Business:

1563 SIESTA DRIVE
SARASOTA, FL 34239 US

New Principal Place of Business:

6022 S. TAMiami TRAIL
SARASOTA, FL 34231 US

Current Mailing Address:

1563 SIESTA DRIVE
SARASOTA, FL 34239 US

New Mailing Address:

6022 S. TAMiami TRAIL
SARASOTA, FL 34231 US

FEI Number: 26-2885494

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KULLE, ARON
1563 SIESTA DRIVE
SARASOTA, FL FL US

Name and Address of New Registered Agent:

ANTONY, DEMETRIOS
4410 S. TAMiami TRAIL
SARASOTA, FL 34231 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: DEMETRIOS ANTONY

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KULLE, ARON
Address: 1563 SIESTA DRIVE
City-St-Zip: SARASOTA, FL 34239 US

Title: MGRM () Delete
Name: ANTONY, DEMETRIOS
Address: 7634 TRILLIUM BLVD.
City-St-Zip: SARASOTA, FL 34241 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ANTONY, DEMETRIOS
Address: 4410 S. TAMiami TRAIL
City-St-Zip: SARASOTA, FL 34239 US

Title: MEMB (X) Change () Addition
Name: KULLE, ARON
Address: 1563 SIESTA DRIVE
City-St-Zip: SARASOTA, FL 34239 US

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: DEMETRIOS ANTONY

MGRM

04/30/2009

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