

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000067146

Entity Name: STS PARTNERSHIP, LLC

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

1715 N. POMPANO STREET
SARASOTA, FL 34234

New Principal Place of Business:

Current Mailing Address:

1715 N. POMPANO STREET
SARASOTA, FL 34234

New Mailing Address:

FEI Number: 26-2972892

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VOWELS, SUSAN J
1715 N. POMPANO STREET
SARASOTA, FL 34234 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:

ADDITIONS/CHANGES:

Title: MRS () Change (X) Addition
Name: VOWELS, SUSAN J OWNER
Address: 1715 NORTH POMPANO AVE
City-St-Zip: SARASOTA, FL 34234 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: SUSAN VOWELS

OWNE

04/30/2009

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