

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000067199

FILED  
Apr 14, 2009  
Secretary of State

Entity Name: INFLATABLES OF FLORIDA, LLC

**Current Principal Place of Business:**

4659 GOLDEN APPLES TRAIL  
PORT ORANGE, FL 32129

**New Principal Place of Business:**

796 SANDERS ROAD  
6  
PORT ORANGE, FL 32127

**Current Mailing Address:**

4659 GOLDEN APPLES TRAIL  
PORT ORANGE, FL 32129

**New Mailing Address:**

796 SANDER ROAD  
6  
PORT ORANGE, FL 32127

FEI Number: 26-2970936

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SNELL LEGAL  
160 E. GRANADA BLVD.  
ORMOND BEACH, FL 32176 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: MGRM ( ) Delete  
Name: MONAHAN, EDWARD  
Address: 4659 GOLDEN APPLES TRAIL  
City-St-Zip: PORT ORANGE, FL 32129

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MONAHAN, CHARLES  
Address: 796 SANDERS ROAD #6  
City-St-Zip: PORT ORANGE, FL 32127

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: CHARLES MONAHAN

MGR

04/14/2009

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