2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 31, 2009
Secretary of State

DOCUMENT# L08000067528

Entity Name: BUYERSCORP LLC

Current Principal Place of Business:

12441 S TURNER AVE
FLORAL CITY, FL 34436

New Principal Place of Business:

Current Mailing Address:

12441 S TURNER AVE
FLORAL CITY, FL 34436

New Mailing Address:

FEI Number: 26-0733734 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BYERS, DEBBIE
12441 S TURNER AVE
FLORAL CITY, FL 34436 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: BYERS, DEBBIE
Address: 12441 S TURNER AVE
City-St-Zip: FLORAL CITY, FL 34436

Title: MGRM ( ) Delete
Name: BYERS, FRANK
Address: 12441 S TURNER AVE
City-St-Zip: FLORAL CITY, FL 34436

Title: MGRM ( ) Delete
Name: BYERS, KEITH
Address: 12441 S TURNER AVE
City-St-Zip: FLORAL CITY, FL 34436

Title: MGRM ( ) Delete
Name: BYERS, ANDREA
Address: 12441 S TURNER AVE
City-St-Zip: FLORAL CITY, FL 34436

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

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM ( ) Change (X) Addition
Name: BYERS, RENEE
Address: 12441 S. TURNER AVE.
City-St-Zip: FLORAL CITY, FL 34436

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: DEBBIE BYERS MGR 08/31/2009

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