

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000074931

Entity Name: REREV.COM, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

6822 22ND AVE NORTH
STE 222
ST PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

6822 22ND AVE NORTH
STE 222
ST PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 26-1998774

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HARR, HUDSON
6822 22ND AVE NORTH
STE 222
ST PETERSBURG, FL 33710 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: MCKEE, MICHAEL L
Address: 7 SW 5TH AVE N
City-St-Zip: ST PETERSBURG, FL 33710

Title: MGR () Delete
Name: HARR, HUDSONL W
Address: 6822 22ND AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33710

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

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: HARR, HUDSONL W
Address: 6822 22ND AVE NORTH SUITE 222
City-St-Zip: ST PETERSBURG, FL 33710

Title: MGR () Change (X) Addition
Name: WORTHINGTON, NATHALIE
Address: 6822 22ND AVE NORTH SUITE 222
City-St-Zip: ST. PETERSBURG, FL 33710

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: HUDSON HARR

MGR

04/29/2009

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