2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# L08000078265

Entity Name: SIGN POSTMAN, LLC

Current Principal Place of Business:

1615 SIR HENRY'S TRAIL
LAKELAND, FL 33809 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 90586
LAKELAND, FL 33804 US

New Mailing Address:

FEI Number: 01-0911834 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HARRIS, TIMOTHY M
1615 SIR HENRY'S TRAIL
LAKELAND, FL 33809 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:	HARRIS, TIMOTHY M	
Address:	P. O. BOX 90586	
City-St-Zip:	LAKELAND, FL 33804 US	
Title:	MGRM	( ) Delete
Name:	HENDERSON, MATTHEW F	
Address:	P.O. BOX 720	
City-St-Zip:	KATHLEEN, FL 33849 US	
Title:	MGRM	( ) Delete
Name:	HARRIS, LINDA G	
Address:	P. O. BOX 90586	
City-St-Zip:	LAKELAND, FL 33804 US	

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:	

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: TIM HARRIS MGRM 01/16/2009

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