

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000084037

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: TABLE OF 4, LLC

## Current Principal Place of Business:

2300 SOUTHEAST 17TH STREET  
SUITE 200  
OCALA, FL 34471 US

## New Principal Place of Business:

## Current Mailing Address:

2300 SOUTHEAST 17TH STREET  
SUITE 200  
OCALA, FL 34471 US

## New Mailing Address:

FEI Number: 26-3290578

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANDERSON, MILES  
2300 SE 17TH STREET  
SUITE 200  
OCALA, FL 34471 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: ANDERSON, MILES  
Address: 20750 SE 55TH STREET  
City-St-Zip: MORRISTON, FL 32668 US

Title: MGR ( ) Delete  
Name: ATSIDES HARVEY, STACY  
Address: 3102 WEST SILVER SPRINGS BOULEVARD  
City-St-Zip: OCALA, FL 34475 US

Title: MGR ( ) Delete  
Name: STRACUZZI, ANDREA  
Address: 2238 SE LAKE WEIR AVENUE  
City-St-Zip: OCALA, FL 34471 US

Title: MGR ( ) Delete  
Name: RISLEY, MARK  
Address: 830 NE 2ND STREET  
City-St-Zip: OCALA, FL 34470 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:

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: MILES ANDERSON

MGRM

04/30/2009

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