

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000099740

FILED  
Apr 01, 2009  
Secretary of State

Entity Name: SUPERNE, LLC

**Current Principal Place of Business:**

4404 RIVER DRIVE  
VALRICO, FL 33596

**New Principal Place of Business:**

**Current Mailing Address:**

4404 RIVER DRIVE  
VALRICO, FL 33596

**New Mailing Address:**

FEI Number: 32-0279668

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RADZIEWICZ, LISA  
3804 WINDTREE COURT  
BRANDON, FL 33511 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: ADAMS, CHERYL L  
Address: 4404 RIVER DRIVE  
City-St-Zip: VALRICO, FL 33596

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

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ADAMS, CHERYL L  
Address: 4404 RIVER DRIVE  
City-St-Zip: VALRICO, FL 33596 US

Title: MGRM ( ) Change (X) Addition  
Name: ADAMS, LEON A  
Address: 435 E. HAMILTON AVE  
City-St-Zip: SHERRILL, NY 13461 US

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: CHERYL L ADAMS

MGR

04/01/2009

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