

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000100108

Entity Name: INLET TREASURES LLC

FILED
Apr 19, 2009
Secretary of State

Current Principal Place of Business:

55 INLET HARBOUR ROAD, SUITE 111
PONCE INLET, FL 32127

New Principal Place of Business:

55 INLET HARBOUR ROAD
SUITE 111
PONCE INLET, FL 32127

Current Mailing Address:

P.O. BOX 291518
PORT ORANGE, FL 321291518

New Mailing Address:

4714 S. PENINSULA DR
PORT ORANGE, FL 32127

FEI Number: 26-3609743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CAMERON, MARLENE
4714 S. PENINSULA DRIVE
PONCE INLET, FL 32127 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: CAMERON, MARLENE
Address: 4714 S. PENINSULA AVE.
City-St-Zip: PONCE INLET, FL 32127

Title: MGR () Delete
Name: ECKERT, LAURA
Address: 66 BAY HARBOUR DRIVE
City-St-Zip: PONCE INLET, FL 32127

ADDITIONS/CHANGES:

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: MARLENE P CAMERON

MGR

04/19/2009

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