

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000100739

Entity Name: M. SIMONE LLC

FILED  
Apr 27, 2009  
Secretary of State

**Current Principal Place of Business:**

300 N. NOVA ROAD  
SUITE 242  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

242 N. NOVA ROAD  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

3452 SADDLE BROOK DRIVE  
MELBOURNE, FL 32934

**New Mailing Address:**

FEI Number: 26-3598769      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

SEAMAN, MONIQUE S  
3452 SADDLE BROOK DRIVE  
MELBOURNE, FL 32934      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: SEAMAN, MONIQUE S  
Address: 3452 SADDLE BROOK DRIVE  
City-St-Zip: MELBOURNE, FL 32934

**ADDITIONS/CHANGES:**

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: MONIQUE SEAMAN

MGR

04/27/2009

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