

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000107481

FILED
Jan 26, 2009
Secretary of State

Entity Name: PAYTAS GROUNDS MAINTENANCE LLC

Current Principal Place of Business:

794 SANDERS ROAD, STE. 1
PORT ORANGE, FL 32127

New Principal Place of Business:

Current Mailing Address:

794 SANDERS ROAD, STE. 1
PORT ORANGE, FL 32127

New Mailing Address:

FEI Number: 26-3811558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: PAYTAS, JAMES JR.
Address: 794 SANDERS ROAD, STE. 1
City-St-Zip: PORT ORANGE, FL 32127

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

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

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PAYTAS, JAMES JR.
Address: 794 SANDERS ROAD, STE. 1
City-St-Zip: PORT ORANGE, FL 32127

Title: MEMB () Change (X) Addition
Name: VANLANDINGHAM, SHANE MEMBER
Address: 430 PENDRY DRIVE
City-St-Zip: PORT ORANGE, FL 32127

Title: MEMB () Change (X) Addition
Name: MORFIS, PAUL MEMBER
Address: 40 COASTAL OAKS CIRCLE
City-St-Zip: PONCE INLET, FL 32127

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: JAMES PAYTAS, JR.

MRG

01/26/2009

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