

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000112604

Entity Name: ELAYAWAY SPORTS LLC

FILED  
Apr 24, 2009  
Secretary of State

## Current Principal Place of Business:

1625 SUMMIT LAKE DRIVE  
205  
TALLAHASSEE, FL 32317

## New Principal Place of Business:

## Current Mailing Address:

1625 SUMMIT LAKE DRIVE  
205  
TALLAHASSEE, FL 32317

## New Mailing Address:

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RYNCARZ, MATTHEW A  
1625 SUMMIT LAKE DRIVE  
205  
TALLAHASSEE, FL 32317 US

## Name and Address of New Registered Agent:

READ, DONAD CHAIRMA  
1625 SUMMIT LAKE DRIVE  
205  
TALLAHASSEE, FL 32317 US

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: DONAD READ

04/24/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: RYNCARZ, MATTHEW A  
Address: 9160 SHADY CREST LANE  
City-St-Zip: TALLAHASSEE, FL 32312

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

## ADDITIONS/CHANGES:

Title: MR (X) Change ( ) Addition  
Name: READ, DONAD CHAIRMA  
Address: 1625 SUMMIT LAKE DRIVE, SUITE 205  
City-St-Zip: TALLAHASSEE, FL 32317

Title: MR ( ) Change (X) Addition  
Name: PINON, SERGIO CEO  
Address: 1625 SUMMIT LAKE DRIVE, SUITE 205  
City-St-Zip: TALLAHASSEE, FL 32317

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: SERGIO PINON

CEO

04/24/2009

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