

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000114732

FILED
Jun 26, 2009
Secretary of State

Entity Name: THE LITTLE YELLOW HOUSE ENTERPRISES "LLC"

Current Principal Place of Business:

11605 HOLMES DRIVE
CLERMONT, FL 34711

New Principal Place of Business:

Current Mailing Address:

11605 HOLMES DRIVE
CLERMONT, FL 34711

New Mailing Address:

FEI Number: 32-0285893 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HARRIMAN, MARGARET
11605 HOLMES DRIVE
CLERMONT, FL 34711 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: MGRM () Delete
Name: HARRIMAN, MARGARET
Address: 11605 HOLMES DRIVE
City-St-Zip: CLERMONT, FL 34711

Title: MGRM () Delete
Name: HARRIMAN, RICHARD
Address: 11605 HOLMES DRIVE
City-St-Zip: CLERMONT, FL 34711

Title: MGRM () Delete
Name: SMITH, BARBARA JEAN
Address: 3 BANKS STREET, P.O. BOX 1183
City-St-Zip: CUTCHOGUE, NY 11935

Title: MGRM () Delete
Name: SMITH, THOMAS
Address: 3 BANKS STREET, P.O. BOX 1183
City-St-Zip: CUTCHOGUE, NY 11935

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARGARET HARRIMAN

MGR

06/26/2009

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