

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000115214

**FILED**  
**Mar 23, 2009**  
**Secretary of State**

**Entity Name:** ES INVESTMENT MANAGEMENT, LLC

**Current Principal Place of Business:**

2641 MCCORMICK DRIVE  
SUITE 102  
CLEARWATER, FL 33759

**New Principal Place of Business:**

2960 TAMPA ROAD  
ROOM 200  
PALM HARBOR, FL 34684

**Current Mailing Address:**

2641 MCCORMICK DRIVE  
SUITE 102  
CLEARWATER, FL 33759

**New Mailing Address:**

2960 TAMPA ROAD  
ROOM 200  
PALM HARBOR, FL 34684

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

HOLLAND, STEVEN L  
2641 MCCORMICK DRIVE  
SUITE 102  
CLEARWATER, FL 33759 US

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

STECK, ESTHER  
2960 TAMPA ROAD  
ROOM 200  
PALM HARBOR, FL 34684 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: ESTHER STECK

03/23/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HOLLAND, STEVEN L  
Address: 2641 MCCORMICK DRIVE, SUITE 102  
City-St-Zip: CLEARWATER, FL 33759

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: STECK, ESTHER  
Address: 2960 TAMPA ROAD, ROOM 200  
City-St-Zip: PALM HARBOR, FL 34684

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: ESTHER STECK

MGR

03/23/2009

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