2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000115633

Entity Name: EMERALD PINE ENTERPRISES LLC

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

247 S. BREVARD AVE. COCOA BEACH, FL 32931 US

Current Mailing Address: New Mailing Address:

P.O. BOX 321298 P.O. BOX 321193

COCOA BEACH, FL 32932 US COCOA BEACH, FL 32932 US

FEI Number: 26-3928010 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

GALLOWAY, JOSHUA 247 S. BREVARD AVE COCOA BEACH, FL 32931

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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Change () Addition () Delete

GALLOWAY, JOSHUA Name: Name: Address: 247 S. BREVARD AVE. Address: City-St-Zip: COCOA BEACH, FL 32931 US City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

GALLOWAY, RAYMOND Name: Name: Address: 309 JOHNSTON DR. Address: City-St-Zip: THOMASTON, GA 30286 US City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

GALLOWAY, SUSAN Name: Name: Address: 309 JOHNSTON DR. Address: City-St-Zip: THOMASTON, GA 30286 US 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: SUSAN GALLOWAY **MGRM** 04/15/2009