

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000045935

Entity Name: KEITH N. FAUST, CPA, LLC

FILED
Jan 06, 2010
Secretary of State

Current Principal Place of Business:

1311 PULLEN ROAD
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 19129
JACKSONVILLE, FL 32245

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:

FAUST, KEITH N
1311 PULLEN ROAD
JACKSONVILLE, FL 32216 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
Name: FAUST, KEITH N SR.
Address: P.O.BOX 19129
City-St-Zip: JACKSONVILLE, FL 32216

I hereby 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: KEITH N. FAUST

MGRM

01/06/2010

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