

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000000717

Entity Name: SCHULTZ HOLDING, L.C.

FILED
Feb 24, 2009
Secretary of State

Current Principal Place of Business:

2440 NE 115TH AVE.
SILVER SPRINGS, FL 34488

New Principal Place of Business:

11523 NE 21ST PLACE
SILVER SPRINGS, FL 34488

Current Mailing Address:

PO BOX 171
SILVER SPRINGS, FL 34489

New Mailing Address:

FEI Number: 59-3453610

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHULTZ, PATRICIA
2440 NE 115TH AVE.
SILVER SPRINGS, FL 34488 US

Name and Address of New Registered Agent:

SCHULTZ, PATRICIA
11523 NE 21ST PLACE
SILVER SPRINGS, FL 34488 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: PATRICIA SCHULTZ

02/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MEM () Delete
Name: SCHULTZ, PATRICIA
Address: 2440 NE 115TH AVE.
City-St-Zip: SILVER SPRINGS, FL 34488

Title: MEM () Delete
Name: SCHULTZ, LEROY SR.
Address: 2440 NE 115TH AVE.
City-St-Zip: SILVER SPRINGS, FL 34488

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SCHULTZ, PATRICIA
Address: PO BOX 171
City-St-Zip: SILVER SPRINGS, FL 34488

Title: MGRM (X) Change () Addition
Name: SCHULTZ, LEROY SR.
Address: PO BOX 171
City-St-Zip: SILVER SPRINGS, FL 34488

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: PATRICIA SCHULTZ

MGRM

02/24/2009

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