

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000001581

Entity Name: NEW MILLENNIAL, L.C.

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

7303 NORTH NEBRASKA AVE.
TAMPA, FL 33604

New Principal Place of Business:

Current Mailing Address:

7303 NORTH NEBRASKA AVE.
TAMPA, FL 33604 US

New Mailing Address:

7303 NORTH NEBRASKA AVENUE
TAMPA, FL 33604

FEI Number: 59-3529418 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

DRUMMOND, TEMPLE H ESQ.
DRUMMOND WEHLE & ROSS, LLP
6987 EAST FOWLER AVENUE
TAMPA, FL 33617 US

Name and Address of New Registered Agent:

SHRENK, MICHAEL D
7303 NORTH NEBRASKA AVENUE
TAMPA, FL 33604 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: MICHAEL D. SHRENK

05/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SHRENK ENTERPRISES, INC.
Address: 7303 NORTH NEBRASKA AVE.
City-St-Zip: TAMPA, FL 33604

Title: MGRM () Delete
Name: GWA ENTERPRISES INC
Address: 8111 BAY COLONY DRIVE
City-St-Zip: NAPLES, FL 34108 US

ADDITIONS/CHANGES:

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: MICHAEL D. SHRENK

MGR

05/01/2009

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