

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L99000000826

Entity Name: ZION ROOTSWEAR L.L.C.

**FILED**  
**Mar 11, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

465 TRESKA RD  
JACKSONVILLE, FL 32225

**New Principal Place of Business:**

**Current Mailing Address:**

465 TRESKA RD  
JACKSONVILLE, FL 32225

**New Mailing Address:**

FEI Number: 59-3561602

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CONLEY, BRIAN MGR  
465 TRESKA RD  
JACKSONVILLE, FL 32225 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: MGR  
Name: CONLEY, MIKE  
Address: 465 TRESKA ROAD  
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGR  
Name: CONLEY, BRIAN  
Address: 465 TRESKA ROAD  
City-St-Zip: JACKSONVILLE, FL 32225

Title: MGR  
Name: CONLEY, GREG  
Address: 465 TRESKA ROAD  
City-St-Zip: JACKSONVILLE, FL 32225

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: BRIAN CONLEY

MGR

03/11/2010

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