

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000004950

Entity Name: ZONER, LLC

FILED  
Apr 13, 2008  
Secretary of State

**Current Principal Place of Business:**

8201 46TH AVE N  
SAINT PETERSBURG, FL 33709

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2507  
PINELLAS PARK, FL 33780

**New Mailing Address:**

FEI Number: 59-3591853

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FRANZONE, LISA  
8201 46TH AVE. N  
SAINT PETERSBURG, FL 33709 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: VP ( ) Delete  
Name: FRANZONE, MICHAEL J  
Address: 8201 46TH AVE. N  
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: P ( ) Delete  
Name: FRANZONE, LISA M  
Address: 8201 46TH AVE. N  
City-St-Zip: SAINT PETERSBURG, FL 33709

**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: LISA FRANZONE

PR

04/13/2008

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