## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M06000005583

Entity Name: EUCON, LLC

FILED Jun 22, 2009 Secretary of State

Date

**Current Principal Place of Business: New Principal Place of Business:** 

2933 NORTH MYRTLE AVE 10060 SKINNER LAKE DR.

200 500

JACKSONVILLE, FL 32209 JACKSONVILLE, FL 32246

**New Mailing Address: Current Mailing Address:** 

10060 SKINNER LAKE DR 2933 NORTH MYRTLE AVE

200 500

JACKSONVILLE, FL 32209 JACKSONVILLE, FL 32246

FEI Number: 20-5311041 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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: Name and Address of New Registered Agent:

BARBER, EUGENE III BARBER, EUGENE III 4840 SEASCAPE WAY 3701 DANFORTH DR

210 1310

JACKSONVILLE, FL 32224 US JACKSONVILLE, FL 32224 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:

06/22/2009

Electronic Signature of Registered Agent

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: (X) Change ( ) Addition

BARBER, III, EUGENE BARBER,III, EUGENE Name: Name: Address: 4840 SEASCAPE WAY # 210 Address: 3701 DANFORTH DR. # 1310 City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: JACKSONVILLE, FL 32224

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: EUGENE BARBER.III 06/22/2009