2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 21, 2009
Secretary of State

DOCUMENT# M06000006737

Entity Name: MELCHIONNA LLC

Current Principal Place of Business:

4265 WICKS BRANCH RD.
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

4265 WICKS BRANCH RD.
ST. AUGUSTINE, FL 32086

New Mailing Address:

750 KELLER RD.
AFTON, TN 37616

FEI Number: 51-0612807 **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:

MELCHIONNA, VICTOR
4265 WICKS BRANCH RD.
ST. AUGUSTINE, FL 32086 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 ( ) Delete
Name: MELCHIONNA, VICTOR
Address: 4265 WICKS BRANCH RD.
City-St-Zip: ST. AUGUSTINE, FL 32086

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: MELCHIONNA, VICTOR
Address: 750 KELLER RD.
City-St-Zip: AFTON, TN 37616

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: VICTOR MELCHIONNA PRES 05/21/2009

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