

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000003686

Entity Name: SAND PENNEY LLC

FILED
Jun 25, 2009
Secretary of State

Current Principal Place of Business:

11 TERRI DRIVE
KINGS PARK, NY 11754

New Principal Place of Business:

Current Mailing Address:

11 TERRI DRIVE
KINGS PARK, NY 11754

New Mailing Address:

FEI Number: 26-2952181 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:

COCHRAN, JIM
136 SOUTH HOLIDAY ROAD, UNIT B
MIRAMAR BEACH, FL 32550 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MARGOLIS, MAUREEN
Address: 2 KAY STREET
City-St-Zip: RONKONKOMA, NY 11779

Title: MGRM () Delete
Name: KREITZMAN, PATRICIA M
Address: 11 TERRI DRIVE
City-St-Zip: KINGS PARK, NY 11754

Title: MGRM () Delete
Name: KREITZMAN, HAROLD
Address: 11 TERRI DRIVE
City-St-Zip: KINGS PARK, NY 11754

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: HAROLD KREITZMAN

MGRM

06/25/2009

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