

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000004301

Entity Name: FEDSCO, LLC

FILED  
May 08, 2009  
Secretary of State

## Current Principal Place of Business:

207 TROPIC ISLES DR  
STE 108  
DELRAY BEACH, FL 33483

## New Principal Place of Business:

601 N. CONGRESS AVE  
SUITE 104-A  
DELRAY BEACH, FL 33445

## Current Mailing Address:

207 TROPIC ISLES DR  
STE 108  
DELRAY BEACH, FL 33483

## New Mailing Address:

601 N. CONGRESS AVE  
SUITE 104-A  
DELRAY BEACH, FL 33445

FEI Number: 26-3187749      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:

BRATZOOM, MAYCO K  
207 TROPIC ISLES DR  
STE 108  
DELRAY BEACH, FL 33483 US

## Name and Address of New Registered Agent:

BRATZOOM, MAYCO K  
601 N. CONGRESS AVE  
SUITE 104-A  
DELRAY BEACH, FL 33445 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: MAYCO BRATZOOM

05/08/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: BRATZOOM, MAYCO K  
Address: 207 TROPIC ISLES DR  
City-St-Zip: DELRAY BEACH, FL 33483

## ADDITIONS/CHANGES:

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: MAYCO BRATZOOM

MGR

05/08/2009

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