

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000022729

FILED
Jan 26, 2009
Secretary of State

Entity Name: 1555 BOREN, LLC

Current Principal Place of Business:

<UNUSED>
OCOEE, FL 34761

New Principal Place of Business:

1555 BOREN DR.
OCOEE, FL 34761

Current Mailing Address:

1555 BOREN DR.
OCOEE, FL 34761

New Mailing Address:

FEI Number: 59-3534713 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WUBKER, WARREN W
1555 BOREN DR.
OCOEE, FL 34761 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: MGRM () Delete
Name: WUBKER, WARREN W
Address: 6625 CRENSHAW DRIVE
City-St-Zip: ORLANDO, FL 32835

Title: MGRM () Delete
Name: HALL, CHARLES B
Address: 1407 KELSO BLVD
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM () Delete
Name: JONES, RICHARD E
Address: 13212 LAKE BUTLER BOULEVARD
City-St-Zip: WINTER GARDEN, FL 34787

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: WARREN WUBKER

OWNE

01/26/2009

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