

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043494

FILED  
Jan 18, 2009  
Secretary of State

Entity Name: TURTLE FORESIGHT, LLC

**Current Principal Place of Business:**

1136 H AVENUE NE  
CEDAR RAPIDS, IA 52402

**New Principal Place of Business:**

**Current Mailing Address:**

1136 H AVENUE NE  
CEDAR RAPIDS, IA 52402

**New Mailing Address:**

FEI Number: 20-5404156      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MILLER & PONN, PA  
1525 NORTH PARK DRIVE  
102  
WESTON, FL 33326 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: BIRCHANSKY, LEE D  
Address: 1136 H AVENUE NE  
City-St-Zip: CEDAR RAPIDS, IA 52402

Title: MGRM ( ) Delete  
Name: BIRCHANSKY, CYNDIE B  
Address: 1136 H AVENUE NE  
City-St-Zip: CEDAR RAPIDS, IA 52402

**ADDITIONS/CHANGES:**

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: LEE BIRCHANSKY      PRES      01/18/2009

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