

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000092627

FILED
Apr 07, 2009
Secretary of State

Entity Name: AYoola I, LLC

Current Principal Place of Business:

1035 WINTER SPRINGS BLVD.
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

1035 WINTER SPRINGS BLVD.
WINTER SPRINGS, FL 32708

New Mailing Address:

FEI Number: 20-5713838

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEIER, GREGORY W ESQ
1000 LEGION PLACE SUITE 1700
ORLANDO, FL 32801 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: SANDERS, LOUIS K
Address: 1035 WINTER SPRINGS BLVD.
City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGR () Delete
Name: SANDERS, BETTIE J
Address: 1035 WINTER SPRINGS BLVD.
City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGR () Delete
Name: SANDERS, CHRISTIAN
Address: 116 LAKE CEDAR CIR
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES:

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

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

Title: MGR (X) Change () Addition
Name: SANDERS, CHRISTIAN
Address: 116 LAKE ADA CIRCLE
City-St-Zip: SANFORD, FL 32773

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: BETTIE J. SANDERS

MGR

04/07/2009

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