

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000047587

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: BALBOW, LLC

**Current Principal Place of Business:**

10317 DOWN LAKEVIEW CIR  
WINDERMERE, FL 34786

**New Principal Place of Business:**

**Current Mailing Address:**

10317 DOWN LAKEVIEW CIR  
WINDERMERE, FL 34786

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

AUST, LYNN B ESQ  
1220 E LIVINGSTON ST  
ORLANDO, FL 32803 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: BALLENGER, JAMES  
Address: 10317 DOWN LAKEVIEW CIR  
City-St-Zip: WINDERMERE, FL 34786

Title: MGR ( ) Delete  
Name: BALLENGER, BETTYE  
Address: 10317 DOWN LAKEVIEW CIR  
City-St-Zip: WINDERMERE, FL 34786

**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: LYNN B AUST

ESQ

01/07/2009

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