

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000084413

Entity Name: SGGUSA, LLC

FILED
Feb 11, 2009
Secretary of State

Current Principal Place of Business:

411 CENTRAL PARK DR.
SANFORD, FL 32771

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1747
SORRENTO, FL 32776

New Mailing Address:

411 CENTRAL PARK DR.
SANFORD, FL 32771

FEI Number: 26-0724781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITTLE, GREGORY
1250 CENTRAL PARK DRIVE
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

WHITTLE, GREGORY
411 CENTRAL PARK DRIVE
SANFORD, FL 32771 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: GREGORY WHITTLE

02/11/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WHITTLE, GREGORY
Address: 1250 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM () Delete
Name: SCHWARTZ, NICK
Address: 1250 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM () Delete
Name: WHITE, PAUL R
Address: 1250 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WHITTLE, GREGORY
Address: 411 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM (X) Change () Addition
Name: SCHWARTZ, NICK
Address: 411 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM (X) Change () Addition
Name: WHITE, PAUL R
Address: 411 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM () Change (X) Addition
Name: STURGILL, JONATHAN S
Address: 411 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM () Change (X) Addition
Name: SHEFFLER, EDNA
Address: 411 CENTRAL PARK DRIVE
City-St-Zip: SANFORD, FL 32771 US

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: GREGORY WHITTLE

MGRM

02/11/2009

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