

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000025248

FILED
Apr 30, 2009
Secretary of State

Entity Name: ON-LINE COMMUNICATIONS OF FLORIDA, LLC

Current Principal Place of Business:

3320 W. SR 46
SANFORD, FL 32771

New Principal Place of Business:

3320 W. STATE ROAD 46
SANFORD, FL 32771

Current Mailing Address:

3320 W. SR 46
SANFORD, FL 32771

New Mailing Address:

3320 W. STATE ROAD 46
SANFORD, FL 32771

FEI Number: 26-2121845

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANATSEY, LAWRENCE
3320 W. SR 46
SANFORD, FL 32771 US

Name and Address of New Registered Agent:

CANATSEY, LAWRENCE V.P.
3320 W. STATE ROAD 46
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: LAWRENCE CANATSEY

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ON-LINE COMMUNICATION, LLC
Address: 3320 W. SR 46
City-St-Zip: SANFORD, FL 32771

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CANATSEY, LAWRENCE V.P.
Address: 3320 W. STATE ROAD 46
City-St-Zip: SANFORD, FL 32771

Title: MGR () Change (X) Addition
Name: NOETHEN, DALE R MGR
Address: 3320 W. STATE ROAD 46
City-St-Zip: SANFORD, FL 32771

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: LAWRENCE CANATSEY

V.P.

04/30/2009

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