

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000429

FILED
Jan 18, 2009
Secretary of State

Entity Name: TORGESEN, L.L.C.

Current Principal Place of Business:

3027 SOUTH OSCEOLA AVENUE
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

3240 CARLA ST
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 59-3694163

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSTON, DEAN L
3240 CARLA ST.
ORLANDO, FL 32806 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: JOHNSTON, ALAN
Address: 3027 SOUTH OSCEOLA AVENUE
City-St-Zip: ORLANDO, FL 32806

Title: MGRM () Delete
Name: JOHNSTON, DEAN L
Address: 3240 CARLA ST
City-St-Zip: ORLANDO, FL 32806

Title: MGRM () Delete
Name: PETERSON, MARY L
Address: 3120 S DELANEY ST.
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES:

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

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: DEAN L. JOHNSTON MD

MGR

01/18/2009

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