

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019057

FILED
Apr 14, 2009
Secretary of State

Entity Name: GASPARILLA HOME WATCH SERVICES, LLC

Current Principal Place of Business:

411 PARK AVE
BOCA GRANDE, FL 33921

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1364
BOCA GRANDE, FL 33921

New Mailing Address:

FEI Number: 76-0703080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOJCIK, RANDY A
40 BUNKER PLACE
ROTONDA, FL 33947 US

Name and Address of New Registered Agent:

WOJCIK, RANDY A
9176 SPRING VALLEY ROAD
ENGLEWOOD, FL 34224 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: RANDY WOJCIK

04/14/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WOJCIK, RANDY A MR.
Address: 40 BUNKER PLACE
City-St-Zip: ROTONDA, FL 33947 US

Title: MGR () Delete
Name: PORTELL, CONSTANCE MRS
Address: 978 ROTONDA CIRCLE
City-St-Zip: ROTONDA WEST, FL 33947

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WOJCIK, RANDY A MR.
Address: 9176 SPRING VALLEY ROAD
City-St-Zip: ENGLEWOOD, FL 34224 US

Title: MGR (X) Change () Addition
Name: PORTELL, CONSTANCE MRS
Address: 9160 SPRING VALLEY ROAD
City-St-Zip: ENGLEWOOD, FL 34224

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: CONSTANCE PORTELL

MGR

04/14/2009

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