

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000003978

FILED  
Mar 25, 2009  
Secretary of State

Entity Name: ODIN, LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

1100 SHRIMP BOAT LANE  
FT MYERS BEACH, FL 33931

**New Principal Place of Business:**

**Current Mailing Address:**

1100 SHRIMP BOAT LN  
FORT MYERS BEACH, FL 33931

**New Mailing Address:**

FEI Number: 03-0452787

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ERICKSO, GRANT C  
1100 SHRIMP BOAT LANE  
FT MYERS BEACH, FL 33931 US

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

ERICKSON, GRANT C  
1100 SHRIMP BOAT LANE  
FT MYERS BEACH, FL 33931 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: GRANT ERICKSON

03/25/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ERICKSON, GRANT  
Address: 1216 ALHAMBRA DR  
City-St-Zip: FORT MYERS, FL 33901

**ADDITIONS/CHANGES:**

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: GRANT ERICKSON

MGRM

03/25/2009

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