

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000029946

FILED
Feb 08, 2008
Secretary of State

Entity Name: INTERPLAN SOUTHWEST LLC

Current Principal Place of Business:

4560 BELTLINE ROAD,
SUITE 340
ADDISON, TX 75001 US

New Principal Place of Business:

Current Mailing Address:

933 LEE ROAD, SUITE 120
ORLANDO, FL 32810

New Mailing Address:

FEI Number: 16-1638634 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOLTUN, JEFFREY M ESQUIRE
557 NORTH WYMORE ROAD, SUITE 100
MAITLAND, FL 32751 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: BOYCE, DAVID
Address: 933 LEE ROAD, SUITE 120
City-St-Zip: ORLANDO, FL 32810

Title: MGR () Delete
Name: TRAHAN, FRANCOIS
Address: 933 LEE ROAD, SUITE 120
City-St-Zip: ORLANDO, FL 32810

Title: MGR () Delete
Name: EUSTACE, ANNEMARIE
Address: 933 LEE ROAD, SUITE 120
City-St-Zip: ORLANDO, FL 32810

Title: MGR () Delete
Name: MCCOIG, KENNETH
Address: 933 LEE ROAD, SUITE 120
City-St-Zip: ORLANDO, FL 32810

Title: MGR () Delete
Name: STILWELL, CLARK
Address: 933 LEE ROAD, SUITE 120
City-St-Zip: ORLANDO, FL 32810

Title: MGR (X) Delete
Name: JACOBY, HARVEY
Address: 933 LEE ROAD, SUITE 120
City-St-Zip: ORLANDO, FL 32810

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:

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

Title: MGR (X) Change () Addition
Name: JACOBY, HARVEY
Address: 933 LEE ROAD, SUITE 120
City-St-Zip: ORLANDO, FL 32810

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: DAVID BOYCE

MGRM

02/08/2008

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