

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000033491

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: SUSQUEHANNA HOLDING & INVESTMENTS, LLC

## Current Principal Place of Business:

718 N. WEKIWA SPRINGS ROAD  
APOPKA, FL 32712

## New Principal Place of Business:

260 LAKE DESTINY TRAIL  
ALTAMONTE SPRINGS, FL 32714

## Current Mailing Address:

718 N. WEKIWA SPRINGS ROAD  
APOPKA, FL 32712

## New Mailing Address:

260 LAKE DESTINY TRAIL  
ALTAMONTE SPRINGS, FL 32714

FEI Number: 57-1141346

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BLACKWELDER, EDWIN F MR  
718 N. WEKIWA SPRINGS ROAD  
APOPKA, FL 32714 US

## Name and Address of New Registered Agent:

BLACKWELDER, EDWIN F MR  
260 LAKE DESTINY TRAIL  
ALTAMONTE SPRINGS, FL 32714 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: EDWIN F. BLACKWELDER

02/25/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: BLACKWELDER, EDWIN F MR  
Address: 718 N. WEKIWA SPRINGS ROAD  
City-St-Zip: APOPKA, FL 32712

Title: MEMB ( ) Delete  
Name: BLACKWELDER, ANITA S MRS.  
Address: 3669 WATERCREST DRIVE  
City-St-Zip: LONGWOOD, FL 32779

Title: MEMB ( ) Delete  
Name: BLACKWELDER, MITCHELL A MR.  
Address: 2369 PARK VILLAGE PLACE  
City-St-Zip: APOPKA, FL 32712

Title: AMGR ( ) Delete  
Name: RIVERA, EDWARD R  
Address: 605 YOUNGSTOWN PARKWAY, #44  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MEMB (X) Delete  
Name: RODRIGUEZ, RAMON L  
Address: 718 NORTH WEKIWA SPRINGS ROAD  
City-St-Zip: APOPKA, FL 32712

Title: MEMB (X) Delete  
Name: WHITTAKER, SHAWN R  
Address: 2208 NOVELLA ELIZA LANE  
City-St-Zip: APOPKA, FL 32712

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: BLACKWELDER, EDWIN F MR  
Address: 260 LAKE DESTINY TRAIL  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: ( ) 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: EDWIN F. BLACKWELDER

MGR

02/25/2009

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