

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000006224

FILED
Apr 30, 2009
Secretary of State

Entity Name: PHILORIDA ENTERPRISES LLC

Current Principal Place of Business:

8264-B WILTSHIRE DRIVE
PORT CHARLOTTE, FL 339812809 US

New Principal Place of Business:

Current Mailing Address:

8264-B WILTSHIRE DRIVE
PORT CHARLOTTE, FL 339812809 US

New Mailing Address:

FEI Number: 03-0521894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELDEN, SCOTT A
4535 VASCO STREET
PUNTA GORDA, FL 33950 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: VAN DER HEYDEN, PHILIP
Address: 8264-B WILTSHIRE DRIVE
City-St-Zip: PORT CHARLOTTE, FL 339812809 US

Title: MGRM () Delete
Name: VAN DER HEYDEN, LORRAINE
Address: 8264-B WILTSHIRE DRIVE
City-St-Zip: PORT CHARLOTTE, FL 339812809 US

Title: MGRM () Delete
Name: GHEEN, STEPHEN G
Address: 22360 BUFFALO AVE.
City-St-Zip: PORT CHARLOTTE, FL 339527221 US

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: PHILIP VAN DER HEYDEN

MGRM

04/30/2009

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