## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000027562

1605 W. FAIRBANKS

WINTER PARK, FL 32789 US

Address:

City-St-Zip:

Entity Name: BACKWORKS, LLC

FILED Mar 13, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1605 W. FAIRBANKS AVENUE WINTER PARK, FL 32789 **Current Mailing Address: New Mailing Address:** 1605 W. FAIRBANKS AVENUE WINTER PARK, FL 32789 FEI Number: 20-0114268 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAWIN, PAUL D 1605 W. FAIRBANKS AVENUE WINTER PARK, FL 32789 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: ADDITIONS/CHANGES: ( ) Delete Title: () Change () Addition SAWIN, PAUL D PRESIDE Name: Name: 1605 W. FAIRBANKS AVENUE Address: Address: City-St-Zip: WINTER PARK, FL 32789 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: BAKER, CHRISTOPHER J VP Name: Address: 1605 W. FAIRBANKS AVENUE Address: City-St-Zip: WINTER PARK, FL 32789 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition BEHRMANN, DONALD L VP Name: Name: Address: 1605 W. FAIRBANKS AVENUE Address: City-St-Zip: WINTER PARK, FL 32789 US City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: FIELD, MELVIN SECERTA Name: Address: 1605 W. FAIRBANKS AVENUE Address: City-St-Zip: WINTER PARK, FL 32789 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition LU, WILLIAM Y TREASUR Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: PAUL D SAWIN MGR 03/13/2009