

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030180

FILED
Apr 08, 2009
Secretary of State

Entity Name: S.W. FLORIDA LAND NINE, L.L.C.

Current Principal Place of Business:

4571 COLONIAL BLVD
SUITE 102
FORT MYERS, FL 33966

New Principal Place of Business:

Current Mailing Address:

4571 COLONIAL BLVD
SUITE 102
FORT MYERS, FL 33966

New Mailing Address:

FEI Number: 43-2025570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLISON, JANET E
4571 COLONIAL BLVD SUITE 102
FORT MYERS, FL 33966 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: MGR () Delete
Name: THIBAUT, RANDY
Address: 4571 COLONIAL BLVD SUITE 102
City-St-Zip: FORT MYERS, FL 33966

Title: MGR () Delete
Name: ALLISON, JANET E
Address: 4571 COLONIAL BLVD SUITE 102
City-St-Zip: FORT MYERS, FL 33966

Title: V () Delete
Name: ALLISON, JANET E
Address: 4571 COLONIAL BLVD SUITE 102
City-St-Zip: FORT MYERS, FL 33966

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: JANET E ALLISON

MGR

04/08/2009

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