

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030887

FILED  
Jan 09, 2009  
Secretary of State

**Entity Name:** SUMMERLAND FINANCIAL SERVICES, LLC

**Current Principal Place of Business:**

111 NORTH ORANGE AVENUE  
SUITE 1750  
ORLANDO, FL 32801

**New Principal Place of Business:**

420 SOUTH ORANGE AVENUE  
SUITE 920  
ORLANDO, FL 32801

**Current Mailing Address:**

P.O. BOX 51  
ORLANDO, FL 32802

**New Mailing Address:**

**FEI Number:** 06-1706611

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CALLAHAN, W. SCOTT  
111 N ORANGE AVE STE 1750  
C/O RUDEN MCCLOSKEY  
ORLANDO, FL 32801 US

**Name and Address of New Registered Agent:**

CALLAHAN, W. SCOTT  
420 S. ORANGE AVE STE 920  
C/O RUDEN MCCLOSKEY  
ORLANDO, FL 32801 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:

01/09/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CALLAHAN, W. SCOTT  
Address: P.O. BOX 51  
City-St-Zip: ORLANDO, FL 32802

**ADDITIONS/CHANGES:**

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: W. SCOTT CALLAHAN

MGR

01/09/2009

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