

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041765

FILED
Jan 27, 2009
Secretary of State

Entity Name: SWPV IV INVESTMENTS LLC

Current Principal Place of Business:

8 BROAD CREEK CIRCLE
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

8 BROAD CREEK CIRCLE
ORMOND BEACH, FL 32174 US

New Mailing Address:

FEI Number: 20-0335699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIEBIS, DANIEL S
3890 TURTLE CREEK DRIVE
SUITE B
PORT ORANGE, FL 32127 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: CURTIS, W T
Address: 8 BROAD CREEK CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
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City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CURTIS, W. T
Address: 8 BROAD CREEK CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGRM () Change (X) Addition
Name: BROWN, DAVID
Address: 145 N. NOVA ROAD
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Change (X) Addition
Name: GAINES, RICK
Address: 734 N. HALIFAX DRIVE
City-St-Zip: ORMOND BEACH, FL 32176

Title: MGRM () Change (X) Addition
Name: CARTLEDGE, THOMAS III
Address: 106 N. OLD KINGS ROAD, #C
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Change (X) Addition
Name: HAMMOND, ROBERT
Address: 101 CUNNINGHAM DRIVE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: MGRM () Change (X) Addition
Name: CHMELARSKI, JAMES
Address: 145 N. NOVA ROAD
City-St-Zip: ORMOND BEACH, FL 32174

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.T. CURTIS

MGR

01/27/2009

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