

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056883

Entity Name: OTF TECHNOLOGIES, LLC

FILED
Apr 24, 2009
Secretary of State

Current Principal Place of Business:

10012 N DALE MABRY
SUITE 101
TAMPA, FL 33618

New Principal Place of Business:

1605 MAIN ST
DUNEDIN, FL 34698

Current Mailing Address:

10012 N DALE MABRY
SUITE 101
TAMPA, FL 33618

New Mailing Address:

PO BOX 46723
TAMPA, FL 33646

FEI Number: 52-2421041

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLT, ROBERT W
10012 N DALE MABRY
SUITE 101
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

BOLT, ROBERT W
1605 MAIN ST
DUNEDIN, FL 34698 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: SUSAN FOLSOM

04/24/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BOLT, ROBERT W
Address: 10012 N DALE MABRY, SUITE 101
City-St-Zip: TAMPA, FL 33618 US

Title: MGRM () Delete
Name: HESSINGER, ROBERT C JR
Address: 10012 N DALE MABRY, STE 101
City-St-Zip: TAMPA, FL 33618 US

Title: MGRM () Delete
Name: FOLSOM, SUSAN I
Address: 10012 N DALE MABRY, SUITE 101
City-St-Zip: TAMPA, FL 33618 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BOLT, ROBERT W
Address: PO BOX 46723
City-St-Zip: TAMPA, FL 33646 US

Title: MGRM (X) Change () Addition
Name: HESSINGER, ROBERT C JR
Address: PO BOX 46723
City-St-Zip: TAMPA, FL 33646 US

Title: MGRM (X) Change () Addition
Name: FOLSOM, SUSAN I
Address: PO BOX 46723
City-St-Zip: TAMPA, FL 33646 US

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: SUSAN FOLSOM

MGRM

04/24/2009

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