## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000012075

Entity Name: TAURUS STORNOWAY INVESTMENTS LLC

FILED Mar 04, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 10161 CENTURION PARKWAY NORTH JACKSONVILLE, FL 32256 **New Mailing Address: Current Mailing Address:** 10161 CENTURION PARKWAY NORTH JACKSONVILLE, FL 32256 FEI Number: 20-0783527 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KASSOF, LINDA 1350 W. NEWPORT CENTER DR. STE 206 DEERFIELD BEACH, FL 33442 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: Title: () Change () Addition () Delete KERLEY, EDWARD G Name: Name: 10161 CENTURION PKWY N. SUITE 111 Address: Address: City-St-Zip: JACKSONVILLE, FL 32256 City-St-Zip: Title: MGR Title: MGR (X) Change ( ) Addition ( ) Delete MERRIGAN, PETER Name: MERRIGAN, PETER Name: Address: 118 MILK STREET Address: 22 BATTERYMARCH STREET City-St-Zip: BOSTON, MA 02109 City-St-Zip: BOSTON, MA 02109 Title: MGR () Delete Title: MGR (X) Change ( ) Addition REIBLING, LORENZ REIBLING, LORENZ Name: Name: 22 BATTERYMARCH STREET Address: 118 MILK STREET Address: City-St-Zip: BOSTON, MA 02109 City-St-Zip: BOSTON, MA 02109 (X) Change ( ) Addition Title: MGR ( ) Delete Title: MGR Name: REIBLING, GUENTHER Name: REIBLING, GUENTHER 118 MILK STREET 1350 E NEWPORT CENTER DR. SUITE 206 Address: Address: City-St-Zip: BOSTON, MA 02109 City-St-Zip: DEERFIELD BEACH, FL 33442 Title: MGR () Delete Title: MGR (X) Change ( ) Addition KASSOF, LINDA Name: Name: KASSOF, LINDA 1350 B. NEWPORT CENTER DRIVE, SUITE 206 1350 E. NEWPORT CENTER DRIVE, SUITE 206 Address: Address: City-St-Zip: DEERFIELD BEACH, FL 33442 City-St-Zip: DEERFIELD BEACH, FL 33442 Title: () Delete Title: () Change () Addition PHILLIPS PAULT Name: Name: Address: 10161 CENTURION PARKWAY NORTH, SUITE III Address: JACKSONVILLE, FL 32256 City-St-Zip: 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: LINDA KASSOF MGR 03/04/2009