

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021826

Entity Name: LOKO, LLC

FILED  
Jan 14, 2009  
Secretary of State

## Current Principal Place of Business:

5551 RIDGEWOOD DRIVE  
SUITE 501  
NAPLES, FL 34108

## New Principal Place of Business:

20751 TANGLEWOOD LANE  
ESTERO, FL 33928

## Current Mailing Address:

P.O. BOX 93  
ESTERO, FL 33928

## New Mailing Address:

P.O. BOX 93  
ESTERO, FL 33929

FEI Number: 20-0913681

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOUKONEN, RACHAEL S  
5551 RIDGEWOOD DRIVE, SUITE 501  
NAPLES, FL 34108 US

## Name and Address of New Registered Agent:

LOUKONEN, RACHAEL S  
5551 RIDGEWOOD DRIVE  
SUITE 501  
NAPLES, FL 34108 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:

01/14/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: LOUKONEN, RACHAEL S  
Address: 20751 TANGLEWOOD LANE  
City-St-Zip: ESTERO, FL 33928

Title: MGRM ( ) Delete  
Name: LOUKONEN, JOHN W  
Address: 20751 TANGLEWOOD LANE  
City-St-Zip: ESTERO, FL 33928

## ADDITIONS/CHANGES:

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: RACHAEL S. LOUKONEN

MGRM

01/14/2009

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