2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2009
Secretary of State

DOCUMENT# L04000047602

Entity Name: A AMERICAN FIRE CO., LLC

Current Principal Place of Business:

17303A ABBOTT AVE.
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

19800 VETERANS BLVD.
B-2
PORT CHARLOTTE, FL 33954

Current Mailing Address:

19800 VETERANS BLVD.
B2
PORT CHARLOTTE, FL 33954

New Mailing Address:

FEI Number: 59-3769244 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KNISLEY, THOMAS L
19800 VETERANS BLVD.
B2
PORT CHARLOTTE, FL 33954 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: KNISLEY, THOMAS L
Address: 19800 VETERANS BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: MGRM ( ) Delete
Name: TAYLOR, ROLAND W III
Address: 14942 WISE WAY
City-St-Zip: FORT MYERS, FL 33905

Title: MGRM ( ) Delete
Name: SCHROYER, WALTER
Address: 19800 VETERANS BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33954

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: THOMAS L. KNISLEY MGR 04/16/2009

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