

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000009774

Entity Name: LONGWOOD-1, LLC

FILED  
Jan 30, 2009  
Secretary of State

**Current Principal Place of Business:**

543 WYMORE ROAD, NORTH, SUITE 103  
MAITLAND, FL 32751

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 941483  
MAITLAND, FL 327941483

**New Mailing Address:**

FEI Number: 83-0425574

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ICARDI, JEFFREY A  
2180 WEST STATE ROAD 434  
SUITE 6190  
LONGWOOD, FL 32779 US

**Name and Address of New Registered Agent:**

ICARDI, JEFFREY A  
549 WYMORE ROAD NORTH  
SUITE 109  
MAITLAND, FL 32751 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:

01/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: ISOLA, ROBERT E  
Address: 543 WYMORE ROAD, NORTH, SUITE 103  
City-St-Zip: MAITLAND, FL 32751

**ADDITIONS/CHANGES:**

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: ROBERT E. ISOLA

MGRM

01/30/2009

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