

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000013518

Entity Name: 1420 OSPREY AVENUE, LLC

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

2780 SOUTH HORSESHOE DRIVE
SUITE #2
NAPLES, FL 34104

Current Mailing Address:

999 VANDERBILT BEACH RD
STE 1000
NAPLES, FL 34108

New Principal Place of Business:

C/O CALVARY AUTOMATION SYSTEMS
45 HENDRIX ROAD
W. HENRIETTA, NY 14586

New Mailing Address:

C/O CALVARY AUTOMATION SYSTEMS
45 HENDRIX ROAD
W. HENRIETTA, NY 14586

FEI Number: 20-1472849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHANEY, MARK
999 VANDERBILT BEACH RD
STE 1000
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

ZUCCARO, SHARON M ESQ.
3451 BONITA BAY BOULEVARD
SUITE 206
BONITA SPRINGS, FL 34134 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: SHARON M. ZUCCARO, ESQ.

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CHANEY, MARK R
Address: 999 VANDERBILT BEACH RD - STE 1000
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CHANEY, MARK R
Address: 45 HENDRIX ROAD
City-St-Zip: W. HENRIETTA, NY 14586

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: MARK CHANEY

MGRM

04/29/2009

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