# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Mar 20, 2009**
**Secretary of State**

DOCUMENT# L05000028056

**Entity Name:** CITIVEST GROUP LLC

**Current Principal Place of Business:**

2515 E SEMORAN BLVD
APOPKA, FL 32703 US

**New Principal Place of Business:**

**Current Mailing Address:**

2515 E SEMORAN BLVD
APOPKA, FL 32703 US

**New Mailing Address:**

**FEI Number: 20-2548001** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

BOWEN, VICTORIA L
2515 E SEMORAN BLVD
APOPKA, FL 32703 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: | MGRM | ( ) Delete |
| Name: | SZANYI, WESLEY K | |
| Address: | 8237 WELLSMERE CIRCLE | |
| City-St-Zip: | ORLANDO, FL 32835 US | |
| Title: | MGRM | ( ) Delete |
| Name: | BOWEN, VICTORIA L | |
| Address: | 8237 WELLSMERE CIRCLE | |
| City-St-Zip: | ORLANDO, FL 32835 US | |
| Title: | MGRM | ( ) Delete |
| Name: | ORTEGA, ROBERT | |
| Address: | 289 LAURNBERG LANE | |
| City-St-Zip: | OCCOEE, FL 34761 US | |

**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: VICTORIA L BOWEN MGRM 03/20/2009

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