

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000035026

**FILED**  
**Apr 28, 2010**  
**Secretary of State**

**Entity Name:** TORCO L.L.C.

**Current Principal Place of Business:**

2134 ANDREA LANE, SUITE D  
SUITE D  
FT. MYERS, FL 33912

**New Principal Place of Business:**

**Current Mailing Address:**

2134 ANDREA LANE, SUITE D  
SUITE D  
FT. MYERS, FL 33912

**New Mailing Address:**

**FEI Number:** 20-2624496

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

COPELAND, TORY D  
2134 ANDREA LANE  
SUITE D  
FT. MYERS, FL 33912 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  
**Name:** COPELAND, TORY D  
**Address:** 2134 ANDREA LANE, SUITE D  
**City-St-Zip:** FT. MYERS, FL 33912

I hereby 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: TORY COPELAND

MGRM

04/28/2010

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