

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000036566

Entity Name: SPIRAL BUDDY, LLC

FILED
Apr 17, 2009
Secretary of State

Current Principal Place of Business:

407 E CENTER STREET
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

1287 PIN OAK DRIVE
APOPKA, FL 32703

Current Mailing Address:

407 E CENTER STREET
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

1287 PIN OAK DRIVE
APOPKA, FL 32703

FEI Number: 27-0122433

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EHRING, SUSAN K
407 E CENTER STREET
ALTAMONTE SPRINGS, FL 32701 US

Name and Address of New Registered Agent:

STUTZMAN, SUSAN K
1287 PIN OAK DRIVE
APOPKA, FL 32703 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: SUSAN K. STUTZMAN

04/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: EHRING, SUSAN K
Address: 407 E CENTER STREET
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: STUTZMAN, SUSAN K
Address: 1287 PIN OAK DRIVE
City-St-Zip: APOPKA, FL 32703

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: SUSAN K. STUTZMAN

MGRM

04/17/2009

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