2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L05000045269

Entity Name: CENTRAL FLORIDA SWIRL, LLC

Current Principal Place of Business:

126 LISA LOOP
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 195608
WINTER SPRINGS, FL 327195608 US

New Mailing Address:

126 LISA LOOP
WINTER SPRINGS, FL 32708

FEI Number: 86-1137992 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THRELKELD, JAMES G JR
126 LISA LOOP
WINTER SPRINGS, FL 32708 US

Name and Address of New Registered Agent:

THRELKELD, LYNN E
126 LISA LOOP
WINTER SPRINGS, FL 32708 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: LYNN E THRELKELD 04/30/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: THRELKELD, JAMES G JR
Address: 126 LISA LOOP
City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGRM ( ) Delete
Name: THRELKELD, LYNN E
Address: 126 LISA LOOP
City-St-Zip: WINTER SPRINGS, FL 32708

ADDITIONS/CHANGES:

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: LYNN E THRELKELD MGRM 04/30/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date