

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000045512

FILED  
Jul 16, 2009  
Secretary of State

Entity Name: SWARE, LLC

## Current Principal Place of Business:

126 FOREST ST.  
NEW CANAAN, CT 06840 US

## New Principal Place of Business:

10 HIGH RIDGE ROAD  
WILTON, CT 06897 US

## Current Mailing Address:

126 FOREST ST.  
NEW CANAAN, CT 06840 US

## New Mailing Address:

10 HIGH RIDGE ROAD  
WILTON, CT 06897 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

## Name and Address of New Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD., SUITE 101  
TALLAHASSEE, FL 323012960 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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: P ( ) Delete  
Name: AHERN, SHEILA  
Address: 126 FOREST  
City-St-Zip: NEW CANAAN, CT 06840

Title: D ( ) Delete  
Name: AHERN, SHEILA  
Address: 126 FOREST STREET  
City-St-Zip: NEW CANAAN, CT 06840

Title: MNGR ( ) Delete  
Name: AHERN, JENNIFER  
Address: 10 HIGH RIDGE ROAD  
City-St-Zip: WILTON, CT 06897 US

## ADDITIONS/CHANGES:

Title: P (X) Change ( ) Addition  
Name: AHERN, SHEILA  
Address: 10 HIGH RIDGE ROAD  
City-St-Zip: WILTON, CT 06897

Title: D (X) Change ( ) Addition  
Name: AHERN, SHEILA  
Address: 10 HIGH RIDGE ROAD  
City-St-Zip: WILTON, CT 06897

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: SHEILA AHERN

MGRM

07/16/2009

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