2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2009
Secretary of State

DOCUMENT# L05000104533

Entity Name: ENTERPRISE PARTNERS OF ORLANDO LLC

Current Principal Place of Business:

825 TOWERING OAK WAY
APOPKA, FL 32712

New Principal Place of Business:

Current Mailing Address:

825 TOWERING OAK WAY
APOPKA, FL 32712

New Mailing Address:

FEI Number: 20-3675638 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GONZALES, JACK
825 TOWERING OAK WAY
APOPKA, FL 32712 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:	MGR	( ) Delete
Name:	GONZALES, JACK	
Address:	825 TOWERING OAK WAY	
City-St-Zip:	APOPKA, FL 32712	
Title:	MGR	( ) Delete
Name:	MATULA, DENNIS	
Address:	664 OAK HOLLOW WAY	
City-St-Zip:	ALTAMONTE SPRINGS, FL 32714	
Title:	MGR	( ) Delete
Name:	OLMEDO, SAMUEL	
Address:	14029 OXGLOVE STREET	
City-St-Zip:	WINTER GARDEN, FL 34787	

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: JACK GONZALES MGR 03/20/2009

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