

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000114827

FILED  
Jan 12, 2009  
Secretary of State

**Entity Name:** SPACE COAST IMAGING VENTURES, LLC

**Current Principal Place of Business:**

P.O. BOX 6543  
TITUSVILLE, FL 327826543

**New Principal Place of Business:**

951 N WASHINGTON AVE  
TITUSVILLE, FL 32796

**Current Mailing Address:**

P.O. BOX 6543  
TITUSVILLE, FL 327826543

**New Mailing Address:**

PO BOX 5489  
TITUSVILLE, FL 32783

**FEI Number:** 20-3872192

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHICK, DAVID L  
301 E. PINE STREET, STE. 1400  
ORLANDO, FL 32801 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: P ( ) Delete  
Name: ANDERSON, ROBERT L  
Address: 3203 SOUTH WASHINGTON AVE #701A  
City-St-Zip: TITUSVILLE, FL 32780

Title: VP ( ) Delete  
Name: MAYER, RICHARD G  
Address: 2812 BEAR ISLAND PT  
City-St-Zip: WINTER PARK, FL 32792

Title: T ( ) Delete  
Name: FLYNN, JOSEPH D  
Address: 3430 HERON LN  
City-St-Zip: TITUSVILLE, FL 32780

Title: S ( ) Delete  
Name: SORBELLO, MICHAEL  
Address: 1111 SUNNY PT DR  
City-St-Zip: MELBOURNE, FL 32935

**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:

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: RICHARD G MAYER

VP

01/12/2009

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