

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000119557

FILED  
Mar 31, 2010  
Secretary of State

Entity Name: THE 909 LLC

**Current Principal Place of Business:**

1649 SWAN TERRACE  
NORTH FT. MYERS, FL 33913

**New Principal Place of Business:**

**Current Mailing Address:**

1649 SWAN TERRACE  
NORTH FT. MYERS, FL 33913

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

EVANS, EVELYN  
1649 SWAN TER  
NORTH FORT MYERS, FL 33903 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  
Name: EVANS, EVELYN  
Address: 1649 SWAN TER  
City-St-Zip: NORTH FORT MYERS, FL 33903

Title: ST  
Name: EVANS, EVELYN  
Address: 1649 SWAN TERR  
City-St-Zip: NORTH FORT MYERS, FL 33903

I hereby 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: EVELYN EVANS

PRES

03/31/2010

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