

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000119557

FILED  
Mar 24, 2012  
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 A  
1649 SWAN TERRACE  
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:                      MGR  
Name:                      EVANS, EVELYN TRUSTEE  
Address:                      1649 SWAN TER  
City-St-Zip:                      NORTH FORT MYERS, FL 33903

Title:                      MRS  
Name:                      AALDERINK, JUDITH J  
Address:                      1021 NW 22 ST  
City-St-Zip:                      CAPE CORAL, FL 33993

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

MGR

03/24/2012

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