2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2009
Secretary of State

DOCUMENT# L06000037548

Entity Name: XOKO, LLC

Current Principal Place of Business:

116 ORANGE AVE.
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

116 ORANGE AVE.
LEESBURG, FL 34748

New Mailing Address:

FEI Number: 20-4668004 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'KELLEY, JOHN D
116 ORANGE AVE.
LEESBURG, FL 34748 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: MGRM ( ) Delete
Name: O'KELLEY, JOHN
Address: 117 N. SEVENTH STREET
City-St-Zip: LEESBURG, FL 34748

Title: MGRM ( ) Delete
Name: MURPHY, VICTORIA LEA
Address: 113 N. SEVENTH STREET
City-St-Zip: LEESBURG, FL 34748

Title: MGRM ( ) Delete
Name: COX, AMY E
Address: 116 ORANGE AVE
City-St-Zip: LEESBURG, FL 34748

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: PEDERSON, AMY C
Address: 116 ORANGE AVE
City-St-Zip: LEESBURG, FL 34748

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: AMY COX PEDERSON MGRM 01/16/2009

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