

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047007

FILED
Apr 14, 2009
Secretary of State

Entity Name: SHAWLAND LLC

Current Principal Place of Business:

4491 SWILCAN BRIDGE LN N
JACKSONVILLE, FL 32224

New Principal Place of Business:

5164 SHAWLAND RD
JACKSONVILLE, FL 32254

Current Mailing Address:

4491 SWILCAN BRIDGE LN N
JACKSONVILLE, FL 32224

New Mailing Address:

5164 SHAWLAND RD
JACKSONVILLE, FL 32254

FEI Number: 20-4818237

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVID, LOUIS CPA
12627 SAN JOSE BLVD
306
JACKSONVILLE, FL 32223 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: DANG, TRANG M
Address: 4491 SWILCAN BRIDGE LANE N.
City-St-Zip: JACKSONVILLE, FL 32224

Title: MGRM () Delete
Name: NGUYEN, BRIAN H
Address: 200 RENAISSANCE PKWY NE #209
City-St-Zip: ATLANTA, GA 30308

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DANG, TRANG M
Address: 5164 SHAWLAND RD
City-St-Zip: JACKSONVILLE, FL 32254

Title: MGRM (X) Change () Addition
Name: NGUYEN, BRIAN H
Address: 5164 SHAWLAND RD
City-St-Zip: JACKSONVILLE, FL 32254

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: T DANG

MGR

04/14/2009

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