

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000054156

**FILED**  
**Mar 20, 2009**  
**Secretary of State**

**Entity Name:** MOCKINGBIRD INVESTORS LLC

**Current Principal Place of Business:**

25940 N 115TH PLACE  
SCOTTSDALE, AZ 85255

**New Principal Place of Business:**

11415 E FOUR PEAKS RD  
SCOTTSDALE, AZ 85262 US

**Current Mailing Address:**

25940 N 115TH PLACE  
SCOTTSDALE, AZ 85255

**New Mailing Address:**

11415 E FOUR PEAKS RD  
SCOTTSDALE, AZ 85262 US

**FEI Number:** 20-4936511

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WALTON, R KEITH  
2101 NW SECOND AVENUE  
SUITE 5  
BOCA RATON, FL 33431 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:** MAGGIORE, ANTHONY R  
**Address:** 25940 N 115TH PLACE  
**City-St-Zip:** SCOTTSDALE, AZ 85255

**ADDITIONS/CHANGES:**

**Title:** MGRM (X) Change ( ) Addition  
**Name:** MAGGIORE, ANTHONY R  
**Address:** 11415 E FOUR PEAKS RD  
**City-St-Zip:** SCOTTSDALE, AZ 85262 US

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:** ANTHONY R. MAGGIORE

MGRM

03/20/2009

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