## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000078341

Entity Name: VANGUARD TECH, LLC

Address:

City-St-Zip:

3401 W WALNUT ST

TAMPA, FL 33607

FILED Apr 15, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 407 LAKE HOWELL RD STE. 118 MAITLAND, FL 32751 **New Mailing Address: Current Mailing Address:** 3401 W. WALNUT ST TAMPA, FL 33607 FEI Number: 20-5347978 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILLIAMS, VONKELI E 407 LAKE HOWELL RD. STE. 118 MAITLAND, FL 32751 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete WILLIAMS, VONKELI E Name: Name: Address: 201 MONROE AVE. 26TH Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: WILLIAMS, ROBERT L Name: Address: 3401 W WALNUT ST Address: City-St-Zip: TAMPA, FL 33607 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition WILLIAMS, CHERYL D Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: ROBERT L. WILLIAMS MGRM 04/15/2009