

**2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000090513

**FILED  
Jan 18, 2010  
Secretary of State**

**Entity Name:** 829 ANGELA, L.L.C.

**Current Principal Place of Business:**

635 SOMMERS HAMMOCK LANE  
MERRITT ISLAND, FL 32953

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 542307  
MERRITT ISLAND, FL 32954

**New Mailing Address:**

**FEI Number:** 20-5550615      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KOCH, DAVID C  
635 SOMMERS HAMMOCK LANE  
MERRITT ISLAND, FL 32953      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  
**Name:** KOCH, DAVID C  
**Address:** 635 SOMMERS HAMMOCK LANE  
**City-St-Zip:** MERRITT ISLAND, FL 32953

**Title:** MGRM  
**Name:** KOCH, VERNON R  
**Address:** 635 SOMMERS HAMMOCK LANE  
**City-St-Zip:** MERRITT ISLAND, FL 32953

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: DAVID C KOCH      MGRM      01/18/2010

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