

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000091797

FILED  
Feb 14, 2007  
Secretary of State

Entity Name: ANDERSON ASSOCIATES OF ORLANDO, LLC

## Current Principal Place of Business:

243 W. PARK AVENUE  
SUITE 201  
WINTER PARK, FL 32789

## New Principal Place of Business:

904 KNOLLWOOD DRIVE  
DAVENPORT, FL 33837

## Current Mailing Address:

243 W. PARK AVENUE  
SUITE 201  
WINTER PARK, FL 32789Q

## New Mailing Address:

904 KNOLLWOOD DRIVE  
DAVENPORT, FL 33837

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LARSEN, ERIK C  
243 W PARK AVENUE  
SUITE 201  
WINTER PARK, FL 32789 US

## Name and Address of New Registered Agent:

ANDERSON, PETER  
904 KNOLLWOOD DRIVE  
DAVENPORT, FL 33837 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: PETER ANDERSON

02/14/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: ANDERSON, PETER  
Address: 11 CHADBURY CROFT  
City-St-Zip: SOLIHULL, ENGLAND, UK B91 3UY

Title: MGRM ( ) Delete  
Name: ANDERSON, RACHEL  
Address: 11 CHADBURY CROFT  
City-St-Zip: SOLIHULL, ENGLAND, UK B91 3UY

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: ANDERSON, PETER  
Address: 904 KNOLLWOOD DRIVE  
City-St-Zip: DAVENPORT, FL 33837 US

Title: MGRM (X) Change ( ) Addition  
Name: ANDERSON, RACHEL  
Address: 904 KNOLLWOOD DRIVE  
City-St-Zip: DAVENPORT, FL 33837 US

I hereby certify that the information supplied with this filing does not qualify for the 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: PETER ANDERSON

MR

02/14/2007

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