2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000018029

Entity Name: OPEN DOOR, L.L.C.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

601 SANDSTONE STREET 8495 ADELE ROAD

LAKELAND, FL 33809 LAKELAND, FL 33810 US

Current Mailing Address: New Mailing Address:

601 SANDSTONE STREET P. O. BOX 833

LAKELAND, FL 33809 CLEARWATER, FL 33757 US

FEI Number: 20-8460073 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

JONES, MIRIAM F MGR
601 SANDSTONE STREET 8495 ADELE ROAD
LAKELAND, FL 33809 US LAKELAND, FL 33810 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: MIRIAM F. JONES 04/27/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Fitle: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 JONES, MIRIAM F
 Name:
 JONES, MIRIAM F MGR

 Address:
 601 SANDSTONE STREET
 Address:
 8495 ADELE ROAD

 City-St-Zip:
 LAKELAND, FL 33809
 City-St-Zip:
 LAKELAND, FL 33810 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: WILLIAMSON, SARAH L Name: WILLIAMSON, SARAH L

Name: WILLIAMSON, SARAH L Name: WILLIAMSON, SARAH L
Address: P. O. BOX 92547 Address: P. O. BOX 833

City-St-Zip: LAKELAND, FL 33804 City-St-Zip: CLEARWATER, FL 33757 US

Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: MATHIS, JAMIE MATHIS, JAMIE

 Address:
 652 BROWN ROAD
 Address:
 652 BROWN ROAD

 City-St-Zip:
 LAMONT, FL 32336
 City-St-Zip:
 LAMONT, FL 32336 US

Title: () Delete Title: MGRM () Change (X) Addition

 Name:
 Name:
 LEGGETT, RUBY C

 Address:
 Address:
 1136 LASALLE STREET

 City-St-Zip:
 City-St-Zip:
 CLEARWATER, FL 33755 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: MIRIAM F. JONES MGR 04/27/2009