

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000045835

FILED
Mar 29, 2009
Secretary of State

Entity Name: TWIN CEDAR 4, LLC

Current Principal Place of Business:

3430 S.W. 86TH PLACE
OCALA, FL 34476 US

New Principal Place of Business:

Current Mailing Address:

3101 S.W. 34TH AVENUE
#905-155
OCALA, FL 34474 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

MCLEOD, CHARLES L SR.
3101 S.W. 34TH AVENUE
#905-155
OCALA, FL 34474 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: CHARLES L. MCLEOD, S, R. REVOCABLE T R UST
Address: 3101 S.W. 34TH AVENUE #905-155
City-St-Zip: Ocala, FL 34474 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CHARLES L. MCLEOD, SR. MGRM 03/29/2009

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