## 2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L07000046746

Entity Name: ODC 1, LLC

FILED Apr 16, 2008 Secretary of State

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

247 NORTH COLLIER BOULEVARD SUITE 202 MARCO ISLAND, FL 34145

**New Mailing Address: Current Mailing Address:** 

PO BOX 394 PO BOX 2056

JOHNSTON, IA 50131 03 MARCO ISLAND, FL 34145

FEI Number: 20-8957262 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:

MORRIS, WILLIAM G ESQ 247 N. COLLIER BLVD. SUITE 202 MARCO ISLAND, FL 34145 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

Title:

Title:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES:

Date

(X) Change ( ) Addition

() Change () Addition

247 NORTH COLLIER BLVD., SUITE 202

MORRIS, WILLIAM G ESQ

MARCO ISLAND, FL 34145

MANAGING MEMBERS/MANAGERS:

() Delete HENNING, JEFFRY Name:

Address: 5800 MERLE HAY ROAD STE 14

City-St-Zip: JOHNSTON, IA 50131

Title: (X) Delete

CHARLSON, JEFFERY E Name: Address: 5800 MERLE HAY ROAD STE 14 City-St-Zip:

Name: Address: JOHNSTON, IA 50131 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: WILLIAM G. MORRIS 04/16/2008