

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED  
Apr 14, 2009  
Secretary of State

DOCUMENT# L07000077957

Entity Name: KING LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

2500 W. LAKE MARY BLVD  
SUITE 214  
LAKE MARY, FL 32746

**New Principal Place of Business:**

2500 W. LAKE MARY BLVD  
SUITE 214  
LAKE MARY, FL 32746 US

**Current Mailing Address:**

1339 GRACE VIEW CT  
LONGWOOD, FL 32750

**New Mailing Address:**

1339 GRACE VIEW CT  
LONGWOOD, FL 32750 US

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

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

KING, MARIANNE  
1339 GRACE VIEW CT  
LONGWOOD, FL 32750 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: MGR ( ) Delete  
Name: KING, MARIANNE  
Address: 1339 GRACE VIEW CT  
City-St-Zip: LONGWOOD, FL 32750

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: KING, MARIANNE  
Address: 1339 GRACE VIEW CT  
City-St-Zip: LONGWOOD, FL 32750 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: MARIANNE KING MGR 04/14/2009

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