

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000079348

Entity Name: BUSHIDO TACTICAL, LLC

FILED
Mar 21, 2009
Secretary of State

Current Principal Place of Business:

3578 EDINGTON WAY
PALM HARBOR, FL 34685

New Principal Place of Business:

10065 LAKE DISTRICT LANE
ORLANDO, FL 32832

Current Mailing Address:

P.O. BOX 744
OLDSMAR, FL 34677

New Mailing Address:

P.O. BOX 721289
ORLANDO, FL 32872

FEI Number: 41-2248480

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RORICH, WADE C MR
3578 EDINGTON WAY
PALM HARBOR, FL 33145 US

Name and Address of New Registered Agent:

RORICH, WADE C MR
10065 LAKE DISTRICT LANE
ORLANDO, FL 32832 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: WADE C. RORICH

03/21/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RORICH, WADE C MR
Address: 3578 EDINGTON WAY
City-St-Zip: PALM HARBOR, FL 34685

Title: MGRM () Delete
Name: RORICH, MICHELE L MRS
Address: 3578 EDINGTON WAY
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RORICH, WADE C MR
Address: 10065 LAKE DISTRICT LANE
City-St-Zip: ORLANDO, FL 32832

Title: MGRM (X) Change () Addition
Name: RORICH, MICHELE L MRS
Address: 10065 LAKE DISTRICT LANE
City-St-Zip: ORLANDO, FL 32832

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: WADE C. RORICH

MGRM

03/21/2009

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