

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000081169

Entity Name: ITC RECOVERY, LLC

FILED
Apr 03, 2009
Secretary of State

Current Principal Place of Business:

1112 SE 9TH LN
CAPE CORAL, FL 33909 US

New Principal Place of Business:

Current Mailing Address:

1112 SE 9TH LN
CAPE CORAL, FL 33909 US

New Mailing Address:

PO BOX 150957
CAPE CORAL, FL 33915 US

FEI Number: 26-0671726

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITTEN, ERIC
4705 SE 4TH PL
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

WHITTEN, ERIC
1112 SE 9TH LN
CAPE CORAL, FL 33990 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:

04/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WHITTEN, ERIC
Address: 4705 SE 4TH PL
City-St-Zip: CAPE CORAL, FL 33904 US

Title: MGRM () Delete
Name: SMITH, ALAN
Address: 1323 NE 9TH PL
City-St-Zip: CAPE CORAL, FL 33409

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WHITTEN, ERIC
Address: 1112 SE 9TH LN
City-St-Zip: CAPE CORAL, FL 33990 US

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: ERIC WHITTEN

MM

04/03/2009

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