

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000083013

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: OSPREY I LLC

**Current Principal Place of Business:**

10460 ROOSEVELT  
133  
SAINT PETERSBURG, FL 33716 US

**New Principal Place of Business:**

**Current Mailing Address:**

10460 ROOSEVELT  
133  
SAINT PETERSBURG, FL 33716 US

**New Mailing Address:**

FEI Number: 26-0706870

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BURNS, ARTHUR D  
10460 ROOSEVELT  
133  
SAINT PETERSBURG, FL 33716 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: TRUXAL, WILLIAM J  
Address: 226 HARBORVIEW LANE  
City-St-Zip: LARGO, FL 34640 US

Title: MGR ( ) Delete  
Name: FREDERICK, HOLICK B  
Address: 1668 EAST LAKE WOODLANDS PARKWAY  
City-St-Zip: OLDSMAR, FL 34677 US

Title: MGR ( ) Delete  
Name: ARTHUR, BURNS D  
Address: 10460 ROOSEVELT #133  
City-St-Zip: SAINT PETERSBURG, FL 33716 US

**ADDITIONS/CHANGES:**

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

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

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: ARTHUR D BURNS

MGR

04/28/2009

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