

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000104839

Entity Name: STANFORD EXCHANGE, L.L.C.

FILED  
Jan 20, 2009  
Secretary of State

**Current Principal Place of Business:**

735 DODECANESE BLVD.  
25  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

**Current Mailing Address:**

668 BAY COVE DRIVE  
TARPON SPRINGS, FL 34689

**New Mailing Address:**

FEI Number: 26-1258815

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STANFORD, RODNEY N  
668 BAY COVE DRIVE  
TARPON SPRINGS, FL 34689 US

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

STANFORD, LYNN A  
668 BAY COVE DRIVE  
TARPON SPRINGS, FL 34689 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: LYNN A STANFORD

01/20/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: STANFORD, LYNN A MANAGER  
Address: 668 BAY COVE DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: STANFORD, LYNN A MGR  
Address: 668 BAY COVE DRIVE  
City-St-Zip: TARPON SPRINGS, FL 34689

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: LYNN A STANFORD

MGR

01/20/2009

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