2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000108857

Address:

City-St-Zip:

WINTER PARK, FL 32790

Entity Name: ALAFAYA TH TRACT 9, LLC

FILED Mar 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: C/O PARKS, DEFILIPPO & ASSOCIATES, PA 203 LOOKOÚT PLACE, SUITE A MAITLAND, FL 32751 **New Mailing Address: Current Mailing Address:** C/O PARKS, DEFILIPPO & ASSOCIATES, PA 203 LOOKOUT PLACE, SUITE A MAITLAND, FL 32751 FEI Number: 26-1317215 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: W & P SERVICES, INC 450 N. WYMORE ROAD WINTER PARK, FL 32789 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: DVPT Title: () Change () Addition () Delete PARKS, LINDA G.T. Name: Name: 203 LOOKOUT PLACE, SUITE A Address: Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: (X) Delete Title: () Change () Addition FROMMELT, VEIT DR. Name: Name: Address: 203 LOOKOUT PLACE, SUITE A Address: City-St-Zip: MAITLAND, FL 32751 City-St-Zip: Title: () Delete Title: () Change () Addition ROSS, LAWRENCE D Name: Name: Address: POB 1980 Address: City-St-Zip: MORRISTOWN, NJ 07962 City-St-Zip: Title: DEVP Title: () Change () Addition () Delete Name: HAYES, GEORGE L III Name: Address: 4701 CTRL AVE STE A Address: City-St-Zip: ST. PETERSBURG, FL City-St-Zip: Title: () Delete Title: () Change () Addition WEBSTER, DAVID A Name: Name: POB 2310

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.

Address:

City-St-Zip:

SIGNATURE: LINDA G.T. PARKS 03/10/2009