

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000007415

Entity Name: COW, LLC

FILED  
Apr 29, 2009  
Secretary of State

**Current Principal Place of Business:**

411 BLACK SPRINGS LANE  
WINTER GARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

411 BLACK SPRINGS LANE  
WINTER GARDEN, FL 34787

**New Mailing Address:**

411 BLACK SPRINGS LANE  
WINTER GARDEN, FL 34787 US

FEI Number: 30-0461496

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KOLTUN, JEFFREY M  
557 NORTH WYMORE ROAD, SUITE 100  
MAITLAND, FL 32751 US

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

WEEKS, BERENICE MGRM  
411 BLACK SPRINGS LANE  
WINTER GARDEN, FL 34787 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: BERENICE WEEKS

04/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WEEKS, BERENICE  
Address: 411 BLACK SPRINGS LANE  
City-St-Zip: WINTER GARDEN, FL 34787

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: WEEKS, BERENICE  
Address: 411 BLACK SPRINGS LANE  
City-St-Zip: WINTER GARDEN, FL 34787 US

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: BERENICE WEEKS

MGRM

04/29/2009

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