

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000009851

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** ORLANDO RENTAL STORE, LLC

**Current Principal Place of Business:**

2101 WEST STATE ROAD 434 SUITE 100  
LONGWOOD, FL 32779 US

**New Principal Place of Business:**

2101 WEST STATE RD 434,  
SUITE 100  
LONGWOOD, FL 32779 US

**Current Mailing Address:**

2101 WEST STATE ROAD 434 SUITE 100  
LONGWOOD, FL 32779 US

**New Mailing Address:**

2101 WEST STATE RD 434,  
SUITE 100  
LONGWOOD, FL 32779 US

**FEI Number:** 26-1866207

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KALEY, MARK C  
2101 WEST STATE ROAD 434 SUITE 100  
LONGWOOD, FL 32779 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: VOIGT, PETER  
Address: 280 WEKIVA SPRINGS ROAD SUITE 2030  
City-St-Zip: LONGWOOD, FL 32779

Title: MGR ( ) Delete  
Name: JABLON, MARC  
Address: 2101 WEST STATE ROAD 434 SUITE 100  
City-St-Zip: LONGWOOD, FL 32779 US

Title: MGR ( ) Delete  
Name: PETERSEIM, BILL  
Address: 2101 WEST STATE ROAD 434 SUITE 100  
City-St-Zip: LONGWOOD, FL 32779 US

Title: MGR ( ) Delete  
Name: MAGUIRE, GREG  
Address: 2101 WEST STATE ROAD 434 SUITE 100  
City-St-Zip: LONGWOOD, FL 32779 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MAGUIRE, GREG  
Address: 2101 WEST STATE RD 434, STE 100  
City-St-Zip: LONGWOOD, FL 32779

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:** GREG MAGUIRE

MGR

04/30/2009

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