

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000042289

FILED  
Mar 31, 2009  
Secretary of State

Entity Name: DIVERSITILE CUSTOM CLOTHING LLC

**Current Principal Place of Business:**

14831 PERDIDO DR.  
ORLANDO, FL 32828

**New Principal Place of Business:**

**Current Mailing Address:**

14831 PERDIDO DR.  
ORLANDO, FL 32828

**New Mailing Address:**

FEI Number: 33-1213424

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAMPBELL, CLIVE C JR.  
14831 PERDIDO  
ORLANDO, FL 32828 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: MGRM ( ) Delete  
Name: CAMPBELL, CLIVE C JR.  
Address: 14831 PERDIDO  
City-St-Zip: ORLANDO, FL 32828

Title: MGRM ( ) Delete  
Name: GORDON, RICHARD E  
Address: 14831 PERDIDO DR.  
City-St-Zip: ORLANDO, FL 32828

Title: MGRM (X) Delete  
Name: THORSTENSON, MARK R  
Address: 10838 HEATHER RIDGE CIRCLE #301  
City-St-Zip: ORLANDO, FL 32817

Title: MGRM ( ) Delete  
Name: TERRAMOCCIA, JOHN S  
Address: 1240 SEEBAY RD.  
City-St-Zip: WESTON, FL 33326

**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:

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: RICHARD GORDON

MGRM

03/31/2009

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