

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000048114

FILED  
Mar 09, 2009  
Secretary of State

Entity Name: SF INVESTMENT FUND, LLC

## Current Principal Place of Business:

529 VERSAILLES DRIVE, STE. 200  
MAITLAND, FL 32751

## New Principal Place of Business:

529 VERSAILLES DRIVE  
SUITE 200  
MAITLAND, FL 32751

## Current Mailing Address:

529 VERSAILLES DRIVE, STE. 200  
MAITLAND, FL 32751

## New Mailing Address:

529 VERSAILLES DRIVE  
SUITE 200  
MAITLAND, FL 32751

FEI Number: 20-1917194

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SHIRLEY, JONATHAN W  
171 CIRCLE DRIVE  
MAITLAND, FL 32751 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: SINGLETON, RALPH  
Address: 529 VERSAILLES DRIVE, STE. 200  
City-St-Zip: MAITLAND, FL 32751

Title: MGR ( ) Delete  
Name: DETWEILER, MAYLINDA  
Address: 529 VERSAILLES DRIVE, STE. 200  
City-St-Zip: MAITLAND, FL 32751

## ADDITIONS/CHANGES:

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: RALPH SINGLETON

MGR

03/09/2009

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