

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000062829

FILED  
Feb 06, 2009  
Secretary of State

Entity Name: GEN-CON DEVELOPMENT, LLC

**Current Principal Place of Business:**

1041 CROWN PARK CIRCLE  
WINTER GARDEN, FL 34787 US

**New Principal Place of Business:**

**Current Mailing Address:**

1041 CROWN PARK CIRCLE  
WINTER GARDEN, FL 34787 US

**New Mailing Address:**

FEI Number: 26-2891819

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

WEBSTER, FRANCIS R  
1041 CROWN PARK CIRCLE  
WINTER GARDEN, FL 34787 US

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

WEBSTER, FRANCES R  
1041 CROWN PARK CIRCLE  
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: FRANCES R WEBSTER

02/06/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WEBSTER, FRANCIS R  
Address: 1041 CROWN PARK CIRCLE  
City-St-Zip: WINTER GARDEN, FL 34787 US

Title: MGRM ( ) Delete  
Name: MARCUM, SCOT G  
Address: P.O. BOX 531  
City-St-Zip: CAPE CANAVERAL, FL 32920 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: MARCUM, SCOT G  
Address: 1041 CROWN PARK CIRCLE  
City-St-Zip: WINTER, 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: SCOT G MARCUM

MGRM

02/06/2009

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