

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000077235

FILED  
Mar 07, 2009  
Secretary of State

Entity Name: XL MERCHANDISING OF FLORIDA, LLC

**Current Principal Place of Business:**

7455 16TH STREET  
UNIT #106  
BRADENTON, FL 34243 US

**New Principal Place of Business:**

**Current Mailing Address:**

9929 LAUREL VALLEY AVENUE CIRCLE  
BRADENTON, FL 34202 US

**New Mailing Address:**

FEI Number: 26-3159631      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

GAIPO, BONNIE  
9929 LAUREL VALLEY AVENUE CIRCLE  
BRADENTON, FL 34202 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: GAIPO, BONNIE L  
Address: 9929 LAUREL VALLEY AVENUE CIRCLE  
City-St-Zip: BRADENTON, FL 34202 US

Title: MGR ( ) Delete  
Name: GAIPO, ROBERT J  
Address: 9929 LAUREL VALLEY AVENUE CIRCLE  
City-St-Zip: BRADENTON, FL 34202 US

Title: MGR ( ) Delete  
Name: LI, XIUYUN  
Address: 1822 WORCHESTER STREET  
City-St-Zip: BALTIMORE, MD 21228 US

Title: MGR ( ) Delete  
Name: KLEIN, JEFFERY  
Address: 10 HEATHER HILL ROAD  
City-St-Zip: CATONSVILLE, MD 21228 US

Title: MGR ( ) Delete  
Name: HARRINGTON, MICHAEL J  
Address: 175 KINGS HIGHWAY #715  
City-St-Zip: PUNTA GORDA, FL 33983

**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:

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: BONNIE GAIPO

MGR

03/07/2009

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