

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000088755

Entity Name: FOR CANDLES.COM LLC

FILED
Apr 15, 2009
Secretary of State

Current Principal Place of Business:

1712 LONG BOW LANE
CLEARWATER, FL 33764

New Principal Place of Business:

1485 INTERNATIONAL PARKWAY
SUITE 1001
HEATHROW, FL 32746

Current Mailing Address:

1712 LONG BOW LANE
CLEARWATER, FL 33764

New Mailing Address:

1485 INTERNATIONAL PARKWAY
SUITE 1001
HEATHROW, FL 32746

FEI Number: 32-0280872

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHULENBERG, LENA
1712 LONG BOW LANE
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

LIPSON, GARY D
390 NORTH ORANGE AVENUE
SUITE 1500
ORLANDO, FL 32801 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: GARY D LIPSON

04/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SCHULENBERG, LENA
Address: 1712 LONG BOW LANE
City-St-Zip: CLEARWATER, FL 33764

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: LEWIS, MICHAEL E
Address: 1485 INTERNATIONAL PKWY, SUITE 1001
City-St-Zip: HEATHROW, FL 32746

Title: MGR () Change (X) Addition
Name: HOVE, STEPHEN D
Address: 1485 INTERNATIONAL PKWY, SUITE 1001
City-St-Zip: HEATHROW, FL 32746

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: MICHAEL E LEWIS

MGR

04/15/2009

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