

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000095342

**FILED**  
**Apr 28, 2009**  
**Secretary of State**

**Entity Name:** LAURA ALEXANDER COMPANY, LLC

**Current Principal Place of Business:**

1594 CAYMAN COURT  
NAPLES, FL 34119

**New Principal Place of Business:**

**Current Mailing Address:**

1594 CAYMAN COURT  
NAPLES, FL 34119

**New Mailing Address:**

**FEI Number:** 26-3539528

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HL STATUTORY AGENT, INC.  
800 LAUREL OAK DRIVE, SUITE 600  
NAPLES, FL 34108 US

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

TAX & ACCOUNTING OF SWFL LLC  
809 WALKERBILT ROAD  
SUITE 6  
NAPLES, FL 34110 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: BJ COTTRELL, JR

04/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ALEXANDER, LAURA C  
Address: 1594 CAYMAN COURT  
City-St-Zip: NAPLES, FL 34119

**ADDITIONS/CHANGES:**

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: BJ COTTRELL, JR

RA

04/28/2009

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