

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000099161

**FILED**  
**Jan 12, 2009**  
**Secretary of State**

**Entity Name:** TOTAL SPACE MANAGEMENT, LLC

**Current Principal Place of Business:**

1966 DOLGNER PLACE  
SANFORD, FL 32771 US

**New Principal Place of Business:**

1954 DOLGNER PLACE  
SANFORD, FL 32771 US

**Current Mailing Address:**

1966 DOLGNER PLACE  
SANFORD, FL 32771 US

**New Mailing Address:**

1954 DOLGNER PLACE  
SANFORD, FL 32771 US

**FEI Number:** 26-3520760

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHERIDAN, TROY D  
4912 SAN MARINO PLACE  
LAKE MARY, FL 32746 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: IRA, STEPHANIE W  
Address: 1966 DOLGNER PLACE  
City-St-Zip: SANFORD, FL 32771

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: IRA, STEPHANIE W  
Address: 1954 DOLGNER PLACE  
City-St-Zip: SANFORD, FL 32771

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:** STEPHANIE W. IRA

MGR

01/12/2009

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