## 2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

## DOCUMENT# L08000112363

Entity Name: CORINTHIAN EXPORT, LLC

Current Principal Place of Business: 2175 MARQUETTE AVE. SANFORD, FL 32773 Current Mailing Address: 2175 MARQUETTE AVE. SANFORD, FL 32773		<b>New Principal Place of Business:</b> 522 HUNT CLUB BLVD 126 APOPKA, FL 32703		
		522 HUNT CLUB BLVD 126 APOPKA, FL 32703		
		FEI Number: 26-3842321	FEI Number Applied For ( )	FEI Number Not Applicable ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:		
KOVACSIK, RICHARD 8297 DAY LILY PLACE SANFORD, FL 32771	US	BARRETT, PATRICK J 1966 PALM VIEW DR APOPKA, FL 32712	JS	

FILED Apr 29, 2009 Secretary of State

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: PATRICK BARRETT			04/29/2009
	Electronic Signature of Registered Agent		Date
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	
Title:	MGRM () Delete	Title:	() Change () Addition
Name:	BARRETT, PATRICK J	Name:	
Address:	1966 PALM VIEW DR.	Address:	
City-St-Zip:	APOPKA, FL 32712	City-St-Zip:	
Title:	MGRM (X) Delete	Title:	() Change () Addition
Name:	KOVACSIK, RICHARD A	Name:	
Address:	8297 DAY LILY PLACE	Address:	
City-St-Zip:	SANFORD, FL 32771	City-St-Zip:	
Title:	MGRM (X) Delete	Title:	()Change ()Addition
Name:	CORVILLE, JOHN G	Name:	
Address:	270 LAKE MARKHAM RD.	Address:	
City-St-Zip:	SANFORD, FL 32771	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:	PATRICK BARRETT	MGR	04/29/2009
	Electronic Signature of Signing Managing Member,	Manager, or Authorized Representativ	/e / Date