## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000114002

**Current Principal Place of Business:** 

Entity Name: ORMOND INVESTORS GROUP, LLC

FILED Jul 13, 2009 Secretary of State

1410 HAND AVE ORMOND BEACH, FL 32174

Current Mailing Address:

1410 HAND AVE ORMOND BEACH, FL 32174

FEI Number: 26-3891034 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

**New Principal Place of Business:** 

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

LAVARIAS SAMUEL,
1410 HAND AVE
1410 HAND AVE

ORMOND BEACH, FL 32174 US ORMOND BEACH, FL 32174 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: SAMUEL LAVARIAS 07/13/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LAVARIAS, SAMUEL
 Name:

 Address:
 1410 HAND AVE
 Address:

 City-St-Zip:
 ORMOND BEACH, FL 32174
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 LAVARIAS, IMELDA
 Name:

 Address:
 1410 HAND AVE
 Address:

 City-St-Zip:
 ORMOND BEACH, FL 32174
 City-St-Zip:

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 SALDON, MANUEL
 Name:

 Address:
 1410 HAND AVE
 Address:

 City-St-Zip:
 ORMOND BEACH, FL 32174
 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: SAMUEL LAVARIAS MR 07/13/2009