

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000025296

Entity Name: 2009 DEKLE AVE., LLC

**FILED**  
**Mar 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

3611 S BEACH DRIVE  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

3611 S BEACH DRIVE  
TAMPA, FL 33629

**New Mailing Address:**

FEI Number: 26-4497307

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOODWIN, JAMES W  
201 NORTH FRANKLIN STREET SUITE 2000  
TAMPA, FL 33602 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  
Name: SANDERS, ROY W  
Address: 3611 S. BEACH DRIVE  
City-St-Zip: TAMPA, FL 33629

Title: MGR  
Name: SANDERS, MELANIE  
Address: 3611 S. BEACH DRIVE  
City-St-Zip: TAMPA, FL 33629

I hereby 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: ROY W. SANDERS

M

03/05/2012

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