## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L98000000954

City-St-Zip:

LEESBURG, FL 34748

Entity Name: LEESBURG VENTURE I, L.C.

FILED Feb 10, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1300 WEST NORTH BLVD. LEESBURG, FL 34748 **Current Mailing Address: New Mailing Address:** 1300 WEST NORTH BLVD. LEESBURG, FL 34748 FEI Number: 59-3530794 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NEWMAN, RICHARD P 1000 W MAIN STREET US LEESBURG, FL 34748 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete VANGUARD ASSOCIATES, INC. Name: Name: Address: 1900 THE EXCHANGE, SUITE 180 Address: City-St-Zip: ATLANTA, GA 30339 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: GRIZZARD, THOMAS D Name: Address: 1300 WEST NORTH BLVD Address: City-St-Zip: LEESBURG, FL 34748 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition GRIZZARD, LAURI A Name: Name: Address: 1300 WEST NORTH BLVD Address:

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.

City-St-Zip:

SIGNATURE: THOMAS D GRIZZARD MGRM 02/10/2009