

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000004844

Entity Name: SHADOW9324 LLC

**FILED**  
**Feb 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9324 SHADOW PINAR CT.  
ORLANDO, FL 32825

**New Principal Place of Business:**

**Current Mailing Address:**

9324 SHADOW PINAR CT.  
ORLANDO, FL 32825

**New Mailing Address:**

FEI Number: 27-0898151

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DEMARA, RONALD F  
9324 SHADOW PINAR CT.  
ORLANDO, FL 32825 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: MGRM  
Name: DEMARA, RONALD F  
Address: 9324 SHADOW PINAR CT.  
City-St-Zip: ORLANDO, FL 32825

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: RONALD F. DEMARA

MGRM

02/26/2012

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