## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000096495

203 FDC GROVE ROAD

DAVENPORT, FL 33837

Address:

City-St-Zip:

FILED Aug 14, 2009 Secretary of State

Entity Na	me: ILI, INC	D.					
Current Principal Place of Business:				New Principal Place of Business:			
203 FDC GROVE ROAD DAVENPORT, FL 33837				43510 NEAL RD PUNTA GORDA, FL 33982			
Current Mailing Address:				New Mailing Address:			
P.O. BOX 846 WALTERBORO, SC 29488				P.O. BOX 512104 PUNTA GORDA, FL 33951			
FEI Number: 59-3675364 FEI Number Applied For			For ( ) FEI Nur	lumber Not Applicable ( ) Certificate of Status Desired ( )			Status Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
1840 SOU MIAMI, FL The above	33145 L	P.A. 2 STREET,4TH FL JS ty submits this stateme	nt for the purpose o	f changing it	ts registere	d office or registe	ered agent, or both,
SIGNATUI	RE:						
Election Car	ce with s. 607	ronic Signature of Regis .193(2)(b), F.S., the corpor cing Trust Fund Contributi ECTORS:	ation did not receive t	-		Date ES TO OFFICER	S AND DIRECTORS:
Title: Name: Address: City-St-Zip:	203 FDC GF	() Delete DN, JEFFREY D ROVE ROAD T, FL 33837		Title: Name: Address: City-St-Zip:		() Change () Add	ition
Title: Name: Address: City-St-Zip:	203 FDC GF	( ) Delete DN, REGINA M ROVE ROAD T, FL 33837		Title: Name: Address: City-St-Zip:		( ) Change ( ) Add	ition
Title: Name:	V WILLIAMS,	()Delete JAMES		Title: Name:	V WILLIAMS,	(X) Change ( ) Add JAMES	lition

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

PO BOX 512104

PUNTA GORDA, FL 33951

SIGNATURE: JAMES WILLIAMS 08/14/2009 ٧