

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# Z00132

Entity Name: TOD-COR, L.C.

FILED
Jan 13, 2009
Secretary of State

Current Principal Place of Business:

6867 GRANADA BOULEVARD
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

6867 GRANADA BOULEVARD
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 65-0148399

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILSON, JANE F
6867 GRANADA BOULEVARD
CORAL GABLES, FL 33146 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 () Delete
Name: AVIRETT, SHELLEY
Address: 7525 BREEZE OVERLOOK
City-St-Zip: CUMMING, GA 30041

Title: MGR () Delete
Name: WILSON, DONNA
Address: 3565 W GLENCOE ST
City-St-Zip: MIAMI, FL 33133

Title: MGR () Delete
Name: WILSON, BRIAN
Address: 2850 DESERT RD
City-St-Zip: MOAB, UT 84532

Title: MGR () Delete
Name: WILSON, RICHARD
Address: 1724 PINE AVE
City-St-Zip: WINTER PARK, FL 32789

Title: MGR () Delete
Name: WILSON, JANE
Address: 6867 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: AVIRETT, TODD
Address: 5171 TIMBER TRAIL
City-St-Zip: ATLANTA, GA 30342

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: DONNA WILSON

MGR

01/13/2009

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