

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024146

FILED  
Mar 03, 2009  
Secretary of State

**Entity Name:** CENTER OF SOLUTION GROUP, LLC

**Current Principal Place of Business:**

137 NORTHWEST 81ST WAY  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

**Current Mailing Address:**

224 POSSUM PASS  
WEST PALM BEACH, FL 33413

**New Mailing Address:**

FEI Number: 34-1987701

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VONHASSELN, STEVE  
137 NORTHWEST 81ST WAY  
CORAL SPRINGS, FL 33071 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: CEO ( ) Delete  
Name: GILLIS, T. (DOC) D MR  
Address: 224 POSSUM PASS  
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: EXEC ( ) Delete  
Name: VONHASSELN, STEVE MR.  
Address: 137 NORTHWEST 81ST WAY  
City-St-Zip: CORAL SPRINGS, FL 33071

**ADDITIONS/CHANGES:**

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: TRAVIS D. GILLIS

CEO

03/03/2009

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