

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000045506

FILED  
Feb 02, 2009  
Secretary of State

Entity Name: GOLDSTEIN, ZUGMAN, WEINSTEIN & POOLE, LLC

**Current Principal Place of Business:**

300 SOUTH PINE ISLAND ROAD  
SUITE 300  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

300 SOUTH PINE ISLAND ROAD  
SUITE 300  
PLANTATION, FL 33324

**New Mailing Address:**

FEI Number: 20-0453834      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GOLDSTEIN, IRVING L CPA  
300 SOUTH PINE ISLAND ROAD  
SUITE 300  
PLANTATION, FL 33324 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 ( ) Delete  
Name: IRVING L GOLDSTEIN C, PA PA  
Address: 300 SOUTH PINE ISLAND ROAD SUITE 300  
City-St-Zip: PLANTATION, FL 33324

Title: MGRM ( ) Delete  
Name: FREDERICK S WEINSTEIN, N CPA PA  
Address: 4875 N FEDERAL HIGHWAY 4TH FLOOR  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGRM ( ) Delete  
Name: DAVID B ZUGMAN CPA P, A  
Address: 4875 N. FEDERAL HIGHWAY, 4TH FLOOR  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGRM ( ) Delete  
Name: DAVID B BLACK CPA PA,  
Address: 4875 N. FEDERAL HIGHWAY, 4TH FLOOR  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGRM ( ) Delete  
Name: STEVEN M BORISMAN CP, A PA  
Address: 4875 N FEDERAL HIGHWAY, 4TH FLOOR  
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGRM ( ) Delete  
Name: GEORGE F HORVATH CPA, PA  
Address: 4875 N FEDERAL HIGHWAY 4TH FLOOR  
City-St-Zip: FORT LAUDERDALE, FL 33308

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: POOLEGOLDSTEIN LLP,  
Address: 300 SOUTH PINE ISLAND ROAD SUITE 300  
City-St-Zip: PLANTATION, FL 33324

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

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

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

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: IRVING L GOLDSTEIN CPA

MGRM

02/02/2009

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