

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000102676

FILED  
Feb 16, 2011  
Secretary of State

**Entity Name:** THE FLORIDA CFO GROUP L.L.C.

**Current Principal Place of Business:**

2101 FLAMEFLOWER COURT  
TRINITY, FL 34655 US

**New Principal Place of Business:**

**Current Mailing Address:**

2101 FLAMEFLOWER COURT  
TRINITY, FL 34655 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired (X)**

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

POLEN, DAN B  
2101 FLAMEFLOWER COURT  
TRINITY, FL 34655 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: BENNETT CONSULTING SERVICES, INC.  
Address: 2168 CENTERVIEW COURT NORTH  
City-St-Zip: CLEARWATER, FL 33759 US

Title: MGRM  
Name: WHITE, JAY J  
Address: 19924 PASO FINO WAY  
City-St-Zip: DADE CITY, FL 33523 US

Title: MGRM  
Name: POLEN, DAN B  
Address: 2101 FLAMEFLOWER COURT  
City-St-Zip: TRINITY, FL 34655 FL

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: DAN B. POLEN

MGRM

02/16/2011

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