

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000065569

**FILED**  
**Apr 28, 2009**  
**Secretary of State**

**Entity Name:** INFINITY LAW GROUP, P.L.

**Current Principal Place of Business:**

3450 BUSCHWOOD PARK DRIVE  
SUITE 165  
TAMPA, FL 33618

**New Principal Place of Business:**

4351 GUNN HIGHWAY  
TAMPA, FL 33618

**Current Mailing Address:**

3450 BUSCHWOOD PARK DRIVE  
SUITE 165  
TAMPA, FL 33618

**New Mailing Address:**

4351 GUNN HIGHWAY  
TAMPA, FL 33618

**FEI Number:** 26-2935008

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLICKENSDEFER, MICHAEL ESQ  
3450 BUSCHWOOD PARK DRIVE  
SUITE 165  
TAMPA, FL 33618 US

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

BLICKENSDEFER, MICHAEL ESQ  
4351 GUNN HIGHWAY  
TAMPA, FL 33618 US

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: \_\_\_\_\_

04/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BLICKENSDEFER, MICHAEL  
Address: 3450 BUSCHWOOD PARK DR, SUITE 165  
City-St-Zip: TAMPA, FL 33618

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BLICKENSDEFER, MICHAEL  
Address: 4351 GUNN HIGHWAY  
City-St-Zip: TAMPA, FL 33618

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: MICHAEL BLICKENSDEFER

MGM

04/28/2009

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