2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000296

Entity Name: BICE COLE LAW FIRM, P.L.

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1333 S.E. 25TH LOOP 101 OCALA, FL 34471 **New Mailing Address: Current Mailing Address:** 1333 S.E. 25TH LOOP OCALA, FL 34471 FEI Number: 59-3615680 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: GLENNY, DAVID A GLENNY, DAVID A 1333 S.E. 25TH LOOP, SUITE 101 1333 S.E. 25TH LOOP OAKHURST PROFESSIONAL PARK 101 OCALA, FL 34471 US OCALA, FL 34471 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: 03/23/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete BICE, JEAN A Name: Name: 1333 S.E. 25TH LOOP, SUITE 101 Address: Address: City-St-Zip: OCALA, FL 34471 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition COLE, SUSAN J Name: Name: Address: 999 PONCE DE LEON BLVD., SUITE 710 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition GLENNY, DAVID A Name: Name: 1333 S.E. 25TH LOOP, SUITE 101 Address: Address: City-St-Zip: OCALA, FL 34471 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: SANDERS, GARY L Name: Address: 1333 S.E. 25TH LOOP, SUITE 101 Address: City-St-Zip: OCALA, FL 34471 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition REICHERT, SCOTT G Name: Name: 1333 S.E. 25TH LOOP, SUITE 101 Address: Address: City-St-Zip: OCALA, FL 34471 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition DAVIS, MARCIA Name: Name: Address: 15316 NW 140TH STREET Address: ALACHUA, FL 32617 City-St-Zip: 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: DAVID A GLENNY MGMR 03/23/2009