

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000001820

FILED
Apr 22, 2009
Secretary of State

Entity Name: CORPORATE PARTNERS INTERNATIONAL, L.L.C.

Current Principal Place of Business:

10230 NORTHWEST 47TH STREET
SUNRISE, FL 33351

New Principal Place of Business:

Current Mailing Address:

10230 NORTHWEST 47TH STREET
SUNRISE, FL 33351

New Mailing Address:

FEI Number: 65-1072071 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OLSON, MAUREEN
10230 NORTHWEST 47TH STREET
SUNRISE, FL 33351 US

Name and Address of New Registered Agent:

OLSON, MAUREEN A
10230 NORTHWEST 47TH STREET
SUNRISE, FL 33351 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: MAUREEN A. OLSON

04/22/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OLSON, MAUREEN A
Address: 10230 NORTHWEST 47TH ST
City-St-Zip: SUNRISE, FL 33351

Title: MGRM () Delete
Name: OLSON, GLENN W
Address: 10230 NORTHWEST 47TH STREET
City-St-Zip: SUNRISE, FL 33351

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: GLENN W. OLSON

MGRM

04/22/2009

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