

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000014724

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Entity Name:** INTERSTATE BUSINESS PARK, LLC

**Current Principal Place of Business:**

8416 LAUREL FAIR CIR  
TAMPA, FL 33610

**New Principal Place of Business:**

8402 LAUREL FAIR CIRCLE  
TAMPA, FL 33610 US

**Current Mailing Address:**

74 WEST PARK PLACE  
STAMFORD, CT 06901

**New Mailing Address:**

74 WEST PARK PLACE  
STAMFORD, CT 06901 US

**FEI Number:** 58-2645873

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, ROBERT M  
ONE NORTH TUTTLE AVE  
SARASOTA, FL 34237 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: GOICHMAN, LAWRENCE W  
Address: 74 WEST PARK PLACE  
City-St-Zip: STAMFORD, CT 06901 US

Title: MGRM  
Name: GOICHMAN, JENNIFER  
Address: 74 WEST PARK PL  
City-St-Zip: STAMFORD, CT 06901 US

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: LAWRENCE GOICHMAN

MGRM

04/19/2010

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