

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000034415

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: MATTHIAS & MATTHIAS, PL

## Current Principal Place of Business:

501 N. ORANGE AVE., SUITE A  
ORLANDO, FL 32801

## New Principal Place of Business:

700 WEST MORSE BLVD.  
SUITE 201  
WINTER PARK, FL 32789

## Current Mailing Address:

P.O. BOX 431  
ORLANDO, FL 328020431

## New Mailing Address:

700 WEST MORSE BLVD.  
SUITE 201  
WINTER PARK, FL 32789

FEI Number: 59-1972274

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MATTHIAS, ROBERT C ESQ.  
501 N. ORANGE AVE., SUITE A  
ORLANDO, FL 32801 US

## Name and Address of New Registered Agent:

MATTHIAS, ROBERT C ESQ.  
700 WEST MORSE BLVD  
SUITE 201  
WINTER PARK, FL 32789 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: ROBERT C. MATTHIAS

04/29/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: MATTHIAS, ROBERT C ESQ.  
Address: 501 N. ORANGE AVE., SUITE A  
City-St-Zip: ORLANDO, FL 32801

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: MATTHIAS, ROBERT C ESQ.  
Address: 700 WEST MORSE BLVD. SUITE 201  
City-St-Zip: WINTER PARK, FL 32789

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: ROBERT C. MATTHIAS

MGMR

04/29/2009

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