

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000035174

**FILED**  
**Mar 30, 2009**  
**Secretary of State**

**Entity Name:** THE CHASE LAW FIRM, LLC

**Current Principal Place of Business:**

1566 VILLAGE SQUARE BLVD STE 2  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

1535 KILLEARN CENTER BLVD  
SUITE A-1  
TALLAHASSEE, FL 32309

**Current Mailing Address:**

1566 VILLAGE SQUARE BLVD STE 2  
TALLAHASSEE, FL 32308

**New Mailing Address:**

1535 KILLEARN CENTER BLVD  
SUITE A-1  
TALLAHASSEE, FL 32309

**FEI Number:** 52-2391041

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHASE, JODI L  
1566 VILLAGE SQUARE BLVD STE 2  
TALLAHASSEE, FL 32308 US

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

CHASE, JODI L  
1535 KILLEARN CENTER BLVD  
SUITE A-1  
TALLAHASSEE, FL 32309 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:**

03/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR ( ) Delete  
**Name:** CHASE, JODI L  
**Address:** 1566 VILLAGE SQUARE BLVD STE 2  
**City-St-Zip:** TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES:**

**Title:** MGR (X) Change ( ) Addition  
**Name:** CHASE, JODI L  
**Address:** 1535  
**City-St-Zip:** TALLAHASSEE, FL 32309

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:** JODI L. CHASE

MGRM

03/30/2009

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