

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013700

FILED  
Apr 03, 2009  
Secretary of State

**Entity Name:** LARRY AND JEAN SPENCER FAMILY LLC

**Current Principal Place of Business:**

7515 NW 41 ST STREET  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

7515 NW 41 ST STREET  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

**FEI Number:** 56-2360645

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPENCER, LARRY  
5280 NW 95TH AVENUE  
CORAL SPRINGS, FL 33076 US

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

SPENCER, LARRY B  
5280 NW 95TH AVENUE  
CORAL SPRINGS, FL 33076 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: LARRY SPENCER

04/03/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: SPENCER, LARRY  
Address: 5280 NW 95TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: MGRM ( ) Delete  
Name: SPENCER, JEAN  
Address: 5280 NW 95TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: MGRM ( ) Delete  
Name: SPENCER, TARA  
Address: 5280 NW 95TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: MGRM ( ) Delete  
Name: SPENCER, MICHAEL  
Address: 5280 NW 95TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: MGRM ( ) Delete  
Name: SPENCER, BRYAN  
Address: 5280 NW 95TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33076

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JEAN SPENCER

MGRM

04/03/2009

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