

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000030302

FILED  
Mar 01, 2010  
Secretary of State

**Entity Name:** WILLIAM S. COFFMAN, JR. ATTORNEY-AT-LAW, P.L.

**Current Principal Place of Business:**

15436 N. FLORIDA AVE, 103  
TAMPA, FL 33613

**New Principal Place of Business:**

15436 N. FLORIDA AVE  
SUITE #103  
TAMPA, FL 33613

**Current Mailing Address:**

15436 N. FLORIDA AVE, 103  
TAMPA, FL 33613

**New Mailing Address:**

15436 N. FLORIDA AVE  
SUITE #103  
TAMPA, FL 33613

**FEI Number:** 01-0795428

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COFFMAN, WILLIAM S JR.  
8910 N. DALE MABRY HWY, STE 36  
TAMPA, FL 33614 US

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

COFFMAN, WILLIAM S JR.  
15436 N. FLORIDA AVENUE  
SUITE #103  
TAMPA, FL 33613 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:

03/01/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: COFFMAN, WILLIAM S JR.  
Address: 15436 N. FLORIDA AVE, 103  
City-St-Zip: TAMPA, FL 33613

Title: T  
Name: COFFMAN, MARY  
Address: 15436 N. FLORIDA AVE, 103  
City-St-Zip: TAMPA, FL 33613

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: WILLIAM S. COFFMAN JR

MGRM

03/01/2010

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