

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000055495

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: FENWAY LLC

**Current Principal Place of Business:**

1201 E. HILLSBORO BLVD  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

1201 E. HILLSBORO BLVD  
DEERFIELD BEACH, FL 33441

**New Mailing Address:**

FEI Number: 01-0804218

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROSEMURGY, ALEXANDER S II  
1201 E HILLSBORO BLVD  
DEERFIELD BEACH, FL 33441 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: D ( ) Delete  
Name: ROSEMURGY, JAMES M  
Address: 1201 E HILLSBORO BLVD  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: MGR ( ) Delete  
Name: DESIATO, NICHOLAS A  
Address: 1201 E HILLSBORO BLVD  
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: DST ( ) Delete  
Name: ROSEMURGY, KIMBERLY A  
Address: 1201 E HILLSBORO BLVD  
City-St-Zip: DEERFIELD BEACH, FL 33441 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: ROSEMURGY, ALEXANDER S II  
Address: 1201 E HILLSBORO BLVD  
City-St-Zip: DEERFIELD BEACH, FL 33441

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: KIMBERLY ROSEMURGY

DST

04/30/2009

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