

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000004283

Entity Name: HOWARD, LLC

FILED
Apr 03, 2009
Secretary of State

Current Principal Place of Business:

1505 NORTH FLORIDA AVENUE
TAMPA, FL 33601

New Principal Place of Business:

1505 NORTH FLORIDA AVENUE
TAMPA, FL 33601 US

Current Mailing Address:

PO BOX 800
TAMPA, FL 336010800

New Mailing Address:

PO BOX 800
TAMPA, FL 33601 US

FEI Number: 20-0604489

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KASS, MICHAEL ESQ.
KASS, SHULER, SOLOMON, SPECTOR ET AL P.A.
1505 NORTH FLORIDA AVENUE
TAMPA, FL 33601 US

Name and Address of New Registered Agent:

KASS, MICHAEL
1505 NORTH FLORIDA AVENUE
TAMPA, FL 33601 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: MICHAEL KASS

04/03/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KASS, MICHAEL
Address: 1505 NORTH FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KASS, MICHAEL
Address: 1505 NORTH FLORIDA AVENUE
City-St-Zip: TAMPA, FL 33602 US

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: MICHAEL KASS

D

04/03/2009

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