

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000088138

Entity Name: 6632 WALLACE ROAD, LLC

FILED
Apr 07, 2009
Secretary of State

Current Principal Place of Business:

4710 HUNTING TRAIL
LAKE WORTH, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

4710 HUNTING TRAIL
LAKE WORTH, FL 33467 US

New Mailing Address:

FEI Number: 20-4772804

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORTON, JAMES A JR
901 N. OLIVE AVENUE
WEST PALM BEACH, FL 33401 US

Name and Address of New Registered Agent:

DAVIS, RICK
901 N. OLIVE AVENUE
WEST PALM BEACH, FL 33401 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: RICK DAVIS

04/07/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BROCHARD, LEILANI
Address: 4710 HUNTING TRAIL
City-St-Zip: LAKE WORTH, FL 33467 US

Title: MGRM () Delete
Name: BROCHARD, GORDON
Address: 4710 HUNTING TRAIL
City-St-Zip: LAKE WORTH, FL 33467 US

Title: MGRM () Delete
Name: JONES, ELEANOR
Address: 8587 THOUSAND PINES COURT
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: MGRM () Delete
Name: JONES, DAN
Address: 8587 THOUSAND PINES COURT
City-St-Zip: WEST PALM BEACH, FL 33411 US

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:

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: LEILANI BROCHARD

MGRM

04/07/2009

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