

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000064524

Entity Name: CUENOT & FORSYTHE, LLC

FILED
Mar 23, 2009
Secretary of State

Current Principal Place of Business:

12230 FOREST HILL BLVD.
SUITE 120
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

12230 FOREST HILL BLVD.
SUITE 120
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 20-3110601

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEENAN, G. MICHAEL
1532 OLD OKEECHOBEE ROAD, SUITE 103
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

PAPARELLA, KATHLEEN A ESQUIRE
12230 W. FOREST HILL BOULEVARD
SUITE 121
WELLINGTON, FL 33414 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: KATHLEEN A. PAPARELLA, ESQUIRE

03/23/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: TERRY W. FORSYTHE, P. .A.
Address: 12230 FOREST HILL BLVD SUITE 120
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM () Delete
Name: KEVIN T. CUENOT, P.A. .
Address: 12230 FOREST HILL BLVD SUITE 120
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES:

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: TERRY W. FORSYTHE, PRES. TERRY W. FORSYTHE MGRM

03/23/2009

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