

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000003856

Entity Name: FORCEFUL EIGHT LLC

FILED  
Aug 06, 2009  
Secretary of State

**Current Principal Place of Business:**

3051 NW 46 AVE  
309  
LAUDERDALE LAKES, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 590852  
FT LAUDERDALE, FL 33359

**New Mailing Address:**

FEI Number: 74-3163939      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

DYER, LORNA  
4960 SABLE PALMS BLVD., APT 210  
TAMARAC, FL 33319      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: D ( ) Delete  
Name: ROWENA, LEWIS  
Address: 3051 NW 46 AVE.  
City-St-Zip: LAUDERDALE LAKES, FL 33313

Title: D ( ) Delete  
Name: GUY, DWYER  
Address: 6410 SW 183 WAY  
City-St-Zip: SW RANCHES, FL 33334

Title: D ( ) Delete  
Name: NEVILLE, SMITH  
Address: 490 GINGER DOWNS  
City-St-Zip: MISSISSAGA ONT, CA L5A3A

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**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: D ( ) Change (X) Addition  
Name: MULLINGS, PATRICK  
Address: 3660 SW 2ND STREET  
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: D ( ) Change (X) Addition  
Name: MOORE, RETTA  
Address: 3660 SW 2ND STREET  
City-St-Zip: FORT LAUDERDALE, FL 33312

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: LORNA DYER

RA

08/06/2009

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