

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000007572

**FILED**  
**Apr 28, 2009**  
**Secretary of State**

**Entity Name:** KOSHIN-HA BUDOKAN OF PALM BEACH, LLC

**Current Principal Place of Business:**

16593 121 TERRACE N  
JUPITER, FL 334786005

**New Principal Place of Business:**

801 MAPLEWOOD DRIVE  
16  
JUPITER, FL 334588800

**Current Mailing Address:**

16593 121 TERRACE N  
JUPITER, FL 334786005

**New Mailing Address:**

801 MAPLEWOOD DRIVE  
16  
JUPITER, FL 334588800

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

BUTZIN, EDWARD L  
16593 121 TERRACE N  
JUPITER, FL 334786005 US

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

BUTZIN, EDWARD L  
801 MAPLEWOOD  
16  
JUPITER, FL 334588800 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: \_\_\_\_\_

04/28/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BUTZIN, EDWARD L  
Address: 16593 121 TERRACE N  
City-St-Zip: JUPITER, FL 334786005

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BUTZIN, EDWARD L  
Address: 801 MAPLEWOOD SUITE 16  
City-St-Zip: JUPITER, FL 334588800

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: EDWARD L BUTZIN

MGRM

04/28/2009

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