

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000056793

**FILED**  
**May 10, 2010**  
**Secretary of State**

**Entity Name:** SOUTH FLORIDA TRIAL LAWYERS LLC

**Current Principal Place of Business:**

1371 SUNSET STRIP  
SUNRISE, FL 33313 US

**New Principal Place of Business:**

5595 ORANGE DRIVE  
101  
DAVIE, FL 33314 US

**Current Mailing Address:**

1371 SUNSET STRIP  
SUNRISE, F 33313 U

**New Mailing Address:**

5595 ORANGE DRIVE  
101  
DAVIE, FL 33314 US

**FEI Number:** 20-5237125      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

EMILIO STILLO PA  
1371 SUNSET STRIP  
SUNRISE, FL 33313 US

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

EMILIO STILLO PA  
1112 WESTON RD  
261  
WESTON, FL 33326 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: EMILIO STILLO PA

05/10/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** NATHAN J AVRUNIN PA  
**Address:** 5595 ORANGE DRIVE, SUITE 101  
**City-St-Zip:** DAVIE, FL 33314

**Title:** MGRM  
**Name:** EMILIO STILLO PA  
**Address:** 1112 WESTON RD, STE 261  
**City-St-Zip:** WESTON, FL 33326

I hereby 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: EMILIO STILLO

MGR

05/10/2010

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