

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000065129

Entity Name: HOWELL ASSOCIATES, LLC

FILED  
Mar 23, 2009  
Secretary of State

**Current Principal Place of Business:**

815 SOUTH UNIVERSITY DRIVE  
SUITE 102  
PLANTATION, FL 33324

**New Principal Place of Business:**

**Current Mailing Address:**

815 SOUTH UNIVERSITY DRIVE  
SUITE 102  
PLANTATION, FL 33324

**New Mailing Address:**

FEI Number: 02-0784414      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FEINMAN, STEVEN A ESQ  
LAW OFFICE OF STEVEN A. FEINMAN  
8530 STATE ROAD 84  
DAVIE, FL 33324 US

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

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: MGRM ( ) Delete  
Name: GOLDBERG, HOWELL  
Address: 815 SOUTH UNIVERSITY DRIVE SUITE 102  
City-St-Zip: PLANTATION, FL 33324

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: GOLDBERG, LINDA  
Address: 815 SOUTH UNIVERSITY DRIVE SUITE 102  
City-St-Zip: PLANTATION, FL 33324

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: HOWELL A. GOLDBERG

PRES

03/23/2009

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