

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000080300

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: THE O'BRIEN LAW FIRM, PL

**Current Principal Place of Business:**

1617 HENDRY STREET, STE. 314  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

1617 HENDRY STREET, STE. 314  
FORT MYERS, FL 33901

**New Mailing Address:**

FEI Number: 20-5378220

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

O'BRIEN, AARON J  
1617 HENDRY STREET, STE. 314  
FORT MYERS, FL 33901 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: MGR ( ) Delete  
Name: O'BRIEN, AARON J  
Address: P.O. BOX 1526  
City-St-Zip: FORT MYERS, FL 33902

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: O'BRIEN, AARON J  
Address: 1617 HENDRY STREET, SUITE 314  
City-St-Zip: FORT MYERS, FL 33901

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: AARON J. O'BRIEN

MGR

04/23/2009

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