

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000082655

FILED  
Jul 24, 2007  
Secretary of State

**Entity Name:** T.W. CHAMBERLAIN & ASSOCIATES, LLC

**Current Principal Place of Business:**

9141 SW 188TH TERRACE  
CUTLER BAY, FL 33157 US

**New Principal Place of Business:**

**Current Mailing Address:**

9141 SW 188TH TERRACE  
CUTLER BAY, FL 33157 US

**New Mailing Address:**

**FEI Number:** 74-3187628 **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:**

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

CHAMBERLAIN, T.W.  
9141 SW 188TH TERRACE  
CUTLER BAY, FL 33157 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: MGRM ( ) Delete  
Name: CHAMBERLAIN, T.W.  
Address: 9141 SW 188TH TERRACE  
City-St-Zip: CUTLER BAY, FL 33157 US

Title: MGRM ( ) Delete  
Name: CHAMBERLAIN, J.A.  
Address: 9141 SW 188TH TERRACE  
City-St-Zip: CUTLER BAY, FL 33157 US

Title: MGRM ( ) Delete  
Name: CHAMBERLAIN, T.A.  
Address: 9141 SW 188TH TERRACE  
City-St-Zip: CUTLER BAY, FL 33157 US

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: MGRM ( ) Change (X) Addition  
Name: CHAMBERLAIN, JR., THOMAS  
Address: 9141 SW 188TH TERRACE  
City-St-Zip: CUTLER BAY, FL 33157 US

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: T.W. CHAMBERLAIN, MANAGING DIRECTOR

M.D.

07/24/2007

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