

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000000737

FILED  
Apr 29, 2009  
Secretary of State

**Entity Name:** THE GABLES LAW CENTER, LLC

**Current Principal Place of Business:**

3081 SALZEDO STREET  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

3081 SALZEDO STREET  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 56-2632396

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRISHMAN, LEONARD  
3081 SALZEDO STREET  
CORAL GABLES, FL 33134 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: FRISHMAN, LEONARD  
Address: P.O. BOX 0326  
City-St-Zip: CRYSTAL RIVER, FL 344230326

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: FRISHMAN, LEONARD  
Address: 3081 SALZEDO STREET  
City-St-Zip: CORAL GABLES, FL 33134

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: LEONARD FRISHMAN

MGR

04/29/2009

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