

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000010587

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** PURMORT FAMILY PARTNERS, LLC

**Current Principal Place of Business:**

1435 LADUE LANE  
SARASOTA, FL 34239

**New Principal Place of Business:**

1435 LADUE LANE  
SARASOTA, FL 34231

**Current Mailing Address:**

1435 LADUE LANE  
SARASOTA, FL 34239

**New Mailing Address:**

1435 LADUE LANE  
SARASOTA, FL 34231

**FEI Number:** 65-0776439

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PURMORT, CLYDE A II  
1435 LADUE LANE  
SARASOTA, FL 34239 US

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

PURMORT, CLYDE A II  
1435 LADUE LANE  
SARASOTA, FL 34231 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:** CLYDE ALLEN PURMORT II

02/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** PURMORT, CLYDE A II  
**Address:** 1435 LADUE LANE  
**City-St-Zip:** SARASOTA, FL 34231

**Title:** MGRM  
**Name:** PURMORT, CERITA L  
**Address:** 1435 LADUE LANE  
**City-St-Zip:** SARASOTA, FL 34231

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:** CLYDE ALLEN PURMMORT II

MGR

02/16/2010

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