

**2009 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

DOCUMENT # L07000015073

1. Entity Name

THE BRAINTRUST GROUP, L.L.C.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

09 NOV 23 PM 1:56

Principal Place of Business

1630 MYRTLE LAKE HILLS ROAD  
LONGWOOD, FL 32750

Mailing Address

1630 MYRTLE LAKE HILLS ROAD  
LONGWOOD, FL 32750



10132009No Chg-LLC

CR2E083 (11/08)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-8384369

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WALTERHOUSE, KATHERINE  
1630 MYRTLE LAKE HILLS ROAD  
LONGWOOD, FL 32750

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Katherine Walterhouse*

11/11/2009

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$330.75  
Due by September 25, 2009**

13895 \$5 certificate

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
WALTERHOUSE, KATHERINE  
1630 MYRTLE LAKE HILLS ROAD  
LONGWOOD, FL 32750

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
WALTERHOUSE, STEVEN  
1630 MYRTLE LAKE HILLS ROAD  
LONGWOOD, FL 32750

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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11/16/09--01006--028 \*\*143:75

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

*Katherine Walterhouse*

11/11/2009

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

09 NOV 23 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

November 16, 2009

THE BRAINTRUST GROUP, L.L.C.  
KATHY WALTERHOUSE  
1630 MYRTLE LAKE HILLS RD  
LONGWOOD, FL 32750

SUBJECT: THE BRAINTRUST GROUP, L.L.C.  
Ref. Number: L07000015073

We have received your document for THE BRAINTRUST GROUP, L.L.C. and check(s) totaling \$143.75. However, the document has not been filed and is being retained in this office for the following reason(s):

There is a balance due of \$105.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

Please return a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Regulatory Specialist II

Letter Number: 009A00035705