2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# L07000061425

Entity Name: LAGAMBA LAW FIRM, PL

Current Principal Place of Business:

1211 ORANGE AVE. SUITE 201
WINTER PARK, FL 32789

New Principal Place of Business:

611 N. WYMORE ROAD
SUITE 105
WINTER PARK, FL 32789

Current Mailing Address:

914 PINEAPPLE RD.
SOUTH DAYTONA, FL 32119

New Mailing Address:

611 N. WYMORE ROAD
SUITE 105
WINTER PARK, FL 32789

FEI Number: 74-3218068 **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:

LAGAMBA, DOROTHY K
1211 ORANGE AVENUE, SUITE 201
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

LAGAMBA, DOROTHY K
611 N. WYMORE ROAD
SUITE 105
WINTER PARK, FL 32789 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: DOROTHY K. LAGAMBA 05/01/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: LAGAMBA, DOROTHY K
Address: 1211 ORANGE AVENUE, SUITE 201
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LAGAMBA, DOROTHY K
Address: 611 N. WYMORE ROAD, SUITE 105
City-St-Zip: WINTER PARK, FL 32789

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: DOROTHY K. LAGAMBA MBR/ 05/01/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date