

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000083536

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: TOMYN OFFICE PARK, LLC

**Current Principal Place of Business:**

6444 WAGGONER DRIVE  
DALLAS, TX 75230

**New Principal Place of Business:**

2215 CEDAR SPRINGS RD  
1111  
DALLAS, TX 75201

**Current Mailing Address:**

6444 WAGGONER DRIVE  
DALLAS, TX 75230

**New Mailing Address:**

2215 CEDAR SPRINGS RD  
1111  
DALLAS, TX 75201

FEI Number: 26-0714019

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KAPLAN, JEFFREY L  
950 S. WINTER PARK DRIVE  
SUITE 350-B  
CASSELBERRY, FL 32707 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: MASSEY, SCOTT  
Address: 6444 WAGGONER DRIVE  
City-St-Zip: DALLAS, TX 75230

Title: MGR (X) Delete  
Name: BURDEN, NICHOLAS  
Address: 2295 S. HIAWASSEE RD., STE 408  
City-St-Zip: ORLANDO, FL 32835

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MASSEY, SCOTT  
Address: 2215 CEDAR SPRINGS RD #1111  
City-St-Zip: DALLAS, TX 75201

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: SCOTT MASSEY

PRES

04/30/2009

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