

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000094771

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** LAW OFFICE OF CATHRYN R. SABRIN, LLC

**Current Principal Place of Business:**

2715 WEST FAIRBANKS AVENUE  
201  
WINTER PARK, FL 32789

**New Principal Place of Business:**

219 TOMOKA TRAIL  
LONGWOOD, FL 32779

**Current Mailing Address:**

2715 WEST FAIRBANKS AVENUE  
201  
WINTER PARK, FL 32789

**New Mailing Address:**

P.O. BOX 160248  
ALTAMONTE SPRINGS, FL 32714

FEI Number: 26-1078516

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SABRIN, CATHRYN R ESQ.  
2715 WEST FAIRBANKS AVENUE  
201  
WINTER PARK, FL 32789 US

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

SABRIN, CATHRYN R ESQ.  
219 TOMOKA TRAIL  
LONGWOOD, FL 32779 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:

04/27/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SABRIN, CATHRYN R ESQ.  
Address: 2715 WEST FAIRBANKS AVENUE, SUITE 201  
City-St-Zip: WINTER PARK, FL 32789

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SABRIN, CATHRYN R ESQ.  
Address: P.O. BOX 160248  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: CATHRYN R. SABRIN

MGR

04/27/2009

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