## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000095552

Entity Name: SEYMOUR SYSTEMS LLC

**FILED** Mar 23, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

310 VELARDE AVE

CORAL GABLES, FL 33134 LIS

**Current Mailing Address: New Mailing Address:** 

310 VELARDE AVE

CORAL GABLES, FL 33134 US

FEI Number: 11-3832992 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

DAVIS, GLADYS S 1865 79TH STREET CAUSEWAY

SUITE # 14 N NORTH BAY VILLAGE, FL 33141 US 1865 79TH STREET CAUSEWAY SUITE # 14 N

DAVIS, GLADYS S MRS.

NORTH BAY VILLAGE, FL 33141 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: GLADYS S. DAVIS 03/23/2009

> Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

MGRM () Delete

DAVIS, GADYS S Name:

Address: 1865 79TH STREET CAUSEWAY, SUITE # 14 N

City-St-Zip: NORTH BAY VILLAGE, FL 33141 US

Title: () Delete

Name: Address: City-St-Zip: ADDITIONS/CHANGES:

Title: (X) Change ( ) Addition

DAVIS, GADYS S MRS. Name:

Address: 1865 79TH STREET CAUSEWAY, SUITE # 14 N

City-St-Zip: NORTH BAY VILLAGE, FL 33141 US

Title: MGR ( ) Change (X) Addition

Name: PARKER, DAPHNE S MRS. Address: 310 VELARDE AVE

City-St-Zip: CORAL GABLES, FL 33134 US

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: DAPHNE S. PARKER 03/23/2009