

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jan 24, 2009  
Secretary of State**

DOCUMENT# L07000101306

Entity Name: JOHN V. ORRICK, P.L.

**Current Principal Place of Business:**

6936 WEST LINEBAUGH AVENUE  
SUITE 101  
TAMPA, FL 33625 US

**New Principal Place of Business:**

**Current Mailing Address:**

6936 WEST LINEBAUGH AVENUE  
SUITE 101  
TAMPA, FL 33625 US

**New Mailing Address:**

FEI Number: 26-1279165      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

ORRICK, JOHN V JR.  
6936 WEST LINEBAUGH AVENUE  
SUITE 101  
TAMPA, FL 33625 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: ORRICK, JOHN V  
Address: 6936 WEST LINEBAUGH AVENUE, SUITE 101  
City-St-Zip: TAMPA, FL 33625 US

**ADDITIONS/CHANGES:**

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: JOHN V. ORRICK, JR.

MGRM

01/24/2009

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