

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000034361

FILED  
Sep 01, 2009  
Secretary of State

**Entity Name:** EDWARD HENSON INVESTIGATIVE SERVICES, LLC

**Current Principal Place of Business:**

101 SOUTH SHORE ROAD  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

101 SOUTH SHORE ROAD  
STUART, FL 34994

**New Mailing Address:**

FEI Number: 26-2249331      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:**

CAPOBIANCO, LINDA ELISE ESQ.  
STONE & CAPOBIANCO, P.L.  
219 EAST OCEAN BOULEVARD  
STUART, FL 34994 US

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

CAPOBIANCO, LINDA ELISE ESQ.  
STONE & CAPOBIANCO, P.L.  
219 EAST OCEAN BOULEVARD  
STUART, FL 34994 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:

09/01/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HENSON, EDWARD  
Address: 101 SOUTH SHORE ROAD  
City-St-Zip: STUART, FL 34994

**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: EDWARD HENSON

P

09/01/2009

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