

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000040881

FILED
Apr 28, 2009
Secretary of State

Entity Name: MOBILE DEVICE PROTECTION ASSOCIATION LLC

Current Principal Place of Business:

13860 SW 33RD COURT
DAVIE, FL 33330 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 273566
DAVIE, FL 33330 US

New Mailing Address:

P. O. BOX 880428
BOCA RATON, FL 33488 US

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DEVICE PROTECTION LLC
13860 SW 33RD COURT
DAVIE, FL 33330 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MM () Change (X) Addition
Name: DEVICE PROTECTION LLC
Address: 13860 SW 33RD CT
City-St-Zip: DAVIE, FL 33330

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: DEVICE PROTECTION LLC

MM

04/28/2009

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