

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000051740

Entity Name: STROOP LAW FIRM, P.L.

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

100 EAST TOWN PLACE  
SUITE 210  
ST. AUGUSTINE, FL 32092 US

## **New Principal Place of Business:**

140 PANTANO CAY BLVD  
UNIT 1201  
ST. AUGUSTINE, FL 32080 US

## **Current Mailing Address:**

100 EAST TOWN PLACE  
SUITE 210  
ST. AUGUSTINE, FL 32092 US

## **New Mailing Address:**

140 PANTANO CAY BLVD  
UNIT 1201  
ST. AUGUSTINE, FL 32080 US

FEI Number: 26-2670546

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STROOP, WILLIAM T  
100 EAST TOWN PLACE  
SUITE 210  
ST. AUGUSTINE, FL 32092 US

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

STROOP, WILLIAM T  
140 PANTANO CAY BLVD  
UNIT 1201  
ST. AUGUSTINE, FL 32080 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:

03/30/2010

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: STROOP, WILLIAM T  
Address: 140 PANTANO CAY BLVD, UNIT 1201  
City-St-Zip: ST. AUGUSTINE, FL 32080 US

I hereby 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: WILLIAM T. STROOP

MGRM

03/30/2010

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