

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000056519

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: BELL, JOHNSON & VAN GRONDELLE CPA FIRM, LLC

**Current Principal Place of Business:**

1420 CELEBRATION BLVD  
STE 200  
CELEBRATION, FL 34747

**New Principal Place of Business:**

600 CAGAN PARK AVE  
STE 8  
CLERMONT, FL 34714

**Current Mailing Address:**

109 AMBERSWEET WAY - # 401  
DAVENPORT, FL 33897

**New Mailing Address:**

FEI Number: 26-2764495      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BELL, MATTHEW  
1420 CELEBRATION BLVD  
STE 200  
CELEBRATION, FL 34747 US

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

VAN GRONDELLE, GARY J CPA  
600 CAGAN PARK AVE  
STE 8  
CLERMONT, FL 34714 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: GARY J VAN GRONDELLE

01/07/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BELL, MATTHEW L CPA  
Address: 1262 SR ANNE SHRINE RD  
City-St-Zip: LAKE WALES, FL 33898

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: JOHNSON, FLOYD A CPA  
Address: 116 E STUART AVE  
City-St-Zip: LAKE WALES, FL 33853

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: VAN GRONDELLE, GARY J CPA  
Address: 508 BRIGHTON DR  
City-St-Zip: DAVENPORT, FL 33897

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: BELL, STEPHEN H JR  
Address: 495 HEATHER CT  
City-St-Zip: BARTOW, FL 33830

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: GARY J. VAN GRONDELLE

MGRM

01/07/2009

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