

# **2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000071285

**FILED**  
**Feb 02, 2009**  
**Secretary of State**

**Entity Name:** LYNUM & ASSOCIATES, PLLC

**Current Principal Place of Business:**

411 ROCK LAKE DRIVE  
ORLANDO, FL 32805

**New Principal Place of Business:**

6996 PIAZZA GRANDE AVE  
SUITE 309  
ORLANDO, FL 32855

**Current Mailing Address:**

P.O.BOX 555206  
ORLANDO, FL 32855 US

**New Mailing Address:**

**FEI Number:** 26-3057037

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LYNUM, E. JUAN  
411 ROCK LAKE DRIVE  
ORLANDO, FL 32805 US

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

LYNUM, E. JUAN  
6996 PIAZZA GRANDE AVENUE  
SUITE 309  
ORLANDO, FL 32835 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: E. JUAN LYNUM, ESQ.

02/02/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: LYNUM, EDWARD J  
Address: P.O. BOX 555206  
City-St-Zip: ORLANDO, FL 32855 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: E. JUAN LYNUM

MGRM

02/02/2009

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