

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000082188

**FILED**  
**Feb 20, 2011**  
**Secretary of State**

**Entity Name:** STINSON ALTERNATIVE DISPUTE RESOLUTION L.L.C.

**Current Principal Place of Business:**

1550 SOUTHERN BOULEVARD  
100  
WEST PALM BEACH, FL 33406

**New Principal Place of Business:**

224 2ND TERRACE  
PALM BEACH GARDENS, FL 33418

**Current Mailing Address:**

1550 SOUTHERN BOULEVARD  
100  
WEST PALM BEACH, FL 33406

**New Mailing Address:**

224 2ND TERRACE  
PALM BEACH GARDENS, FL 33418

**FEI Number:** 36-4640086

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STINSON, STEVEN A ESQ.  
1550 SOUTHERN BOULEVARD  
WEST PALM BEACH, FL 33406 US

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

STINSON, STEVEN A ESQ.  
224 2ND TERRACE  
PALM BEACH GARDENS, FL 33418 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: STEVEN A. STINSON

02/20/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: STINSON, STEVEN A  
Address: 224 2ND TERRACE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: STEVEN A. STINSON

MGRM

02/20/2011

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