

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000001236

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Entity Name:** PROFESSIONAL REORGANIZATION, LLC

**Current Principal Place of Business:**

1115 NAPLES DRIVE  
ORLANDO, FL 32804 US

**New Principal Place of Business:**

1712 WINDERMEREDOWN PL  
WINDERMERE, FL 34786 US

**Current Mailing Address:**

1115 NAPLES DRIVE  
ORLANDO, FL 32804 US

**New Mailing Address:**

1712 WINDERMEREDOWN PL  
WINDERMERE, FL 34786 US

**FEI Number:** 26-3828588

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORRIS, CONNERLEIGH B  
1115 NAPLES DRIVE  
ORLANDO, FL 32804 US

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

MORRIS, CONNERLEIGH B  
1712 WINDERMEREDOWN PL  
WINDERMERE, FL 34786 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: \_\_\_\_\_

02/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MORRIS, CONNERLEIGH B  
Address: 1712 WINDERMEREDOWN PL  
City-St-Zip: WINDERMERE, FL 34786 US

Title: MGRM  
Name: BERGERON, SHARON  
Address: 788 MOUTON AVE  
City-St-Zip: BATON ROUGE, LA 70806 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: CONNERLEIGH BERGERON MORRIS

MGR

02/16/2010

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