

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000025839

**FILED  
Apr 20, 2010  
Secretary of State**

**Entity Name:** THE LAW OFFICE OF EDWARD M. ABEL, D.M.D.,ESQ., LLC

**Current Principal Place of Business:**

3069 ANDERSON SNOW ROAD 165  
SPRING HILL, FL 34609

**New Principal Place of Business:**

**Current Mailing Address:**

3069 ANDERSON SNOW ROAD 165  
SPRING HILL, FL 34609

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

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

ABEL, EDWARD M  
3069 ANDERSON SNOW ROAD 165  
SPRING HILL, FL 34609 US

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

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ABEL, EDWARD M  
Address: 3069 ANDERSON SNOW ROAD 165  
City-St-Zip: SPRING HILL, FL 34609

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: EDWARD M. ABEL, ESQ.

MGR

04/20/2010

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