

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000040286

**FILED**  
**Feb 10, 2010**  
**Secretary of State**

**Entity Name:** SARASOTA MEDIATION SERVICES, LLC

**Current Principal Place of Business:**

1290 N. PALM AVENUE, SUITE 107  
SARASOTA, FL 34231

**New Principal Place of Business:**

1290 N. PALM AVENUE  
SUITE 107  
SARASOTA, FL 34236 US

**Current Mailing Address:**

1290 N. PALM AVENUE, SUITE 107  
SARASOTA, FL 34231

**New Mailing Address:**

1290 N. PALM AVENUE, SUITE 107  
SARASOTA, FL 34236 US

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

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

CRUMP, CHRISTINA  
1290 N. PALM AVENUE, SUITE 107  
SARASOTA, FL 34231 US

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

DONNELLY, JOANCHRISTINA  
1290 N. PALM AVENUE, SUITE 107  
SARASOTA, FL 34236 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: JOAN H DONNELLY.

02/10/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DONNELLY, JOAN H  
Address: 1290 N. PALM AVENUE, SUITE 107  
City-St-Zip: SARASOTA, FL 34236 US

Title: MGRM  
Name: ROBERTS, BEVERLY  
Address: 1290 N. PALM AVENUE, SUITE 107  
City-St-Zip: SARASOTA, FL 34236 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: JOAN H DONNELLY

MGR

02/10/2010

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