

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000048502

**FILED**  
**Apr 24, 2010**  
**Secretary of State**

**Entity Name:** PARTNERSHIP FOR EXCEPTIONAL EMPLOYMENT PLACEMENT SERVICES, LLC

**Current Principal Place of Business:**

821 VENETIA AVENUE  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

821 VENETIA AVENUE  
CORAL GABLES, FL 33134

**New Mailing Address:**

**FEI Number:** 27-0340435

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

MCHALE, EDWARD F  
2855 PGA BLVD.  
PALM BEACH GARDENS, FL 33410 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:** MCHALE, DOROTHY K  
**Address:** 821 VENETIA AVENUE  
**City-St-Zip:** CORAL GABLES, FL 33134

**Title:** MGRM  
**Name:** MCHALE, EMILY N  
**Address:** 6840 SW 45TH LANE #8  
**City-St-Zip:** MIAMI, FL 33155

**Title:** MGRM  
**Name:** MCHALE, WILLIAM J  
**Address:** 8414 SW 103RD AVENUE  
**City-St-Zip:** MIAMI, FL 33173

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:** DOROTHY K. MCHALE

MGRM

04/24/2010

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