

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000005497

**FILED**  
**Jan 06, 2012**  
**Secretary of State**

**Entity Name:** OSBORNE WALKER O'QUINN, P.L.

**Current Principal Place of Business:**

200 SOUTH INDIAN RIVER DRIVE, STE 301  
301  
FORT PIERCE, FL 34950

**New Principal Place of Business:**

200 SOUTH INDIAN RIVER DRIVE  
STE. 301  
FORT PIERCE, FL 34950

**Current Mailing Address:**

200 SOUTH INDIAN RIVER DRIVE, STE 301  
301  
FORT PIERCE, FL 34950

**New Mailing Address:**

200 SOUTH INDIAN RIVER DRIVE  
STE. 301  
FORT PIERCE, FL 34950

**FEI Number:** 27-1670201

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

O'QUINN, OSBORNE W ESQ  
200 SOUTH INDIAN RIVER DRIVE, STE 301  
301  
FORT PIERCE, FL 34950 US

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

O'QUINN, OSBORNE W ESQ  
200 SOUTH INDIAN RIVER DRIVE  
STE., 301  
FORT PIERCE, FL 34950 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:

01/06/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: O'QUINN, OSBORNE W  
Address: 200 SOUTH INDIAN RIVER DRIVE, STE 301  
City-St-Zip: FORT PIERCE, FL 34950

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: OSBORNE WALKER O'QUINN

PRES

01/06/2012

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