

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000001550

FILED  
Jan 17, 2009  
Secretary of State

Entity Name: ROBERT R. POWELL FAMILY, L.C.

**Current Principal Place of Business:**

979 .W. 17TH STREET  
BOCA RATON, FL 33486

**New Principal Place of Business:**

**Current Mailing Address:**

979 .W. 17TH STREET  
BOCA RATON, FL 33486

**New Mailing Address:**

FEI Number: 65-0862681

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OSBORNE, R. BRADY JR  
798 SOUTH FEDERAL HWY  
PO BOX 40  
BOCA RATON, FL 33429 US

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

OSBORNE, R. BRADY JR  
798 SOUTH FEDERAL HWY  
BOCA RATON, FL 33429 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:

01/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: POWELL, ROBERT R  
Address: 979 S.W. 17TH STREET  
City-St-Zip: BOCA RATON, FL 33486

Title: MGRM ( ) Delete  
Name: POWELL, DIANA LEE  
Address: 979 S.W. 17TH STREET  
City-St-Zip: BOCA RATON, FL 33486

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DIANA LEE POWELL

MGRM

01/17/2009

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