2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 26, 2009
Secretary of State

DOCUMENT# L99000006399

Entity Name: TAMARAC POWELL, L.L.C.

Current Principal Place of Business:

6639 EMBASSY COURT
MAUMEE, OH 43537

New Principal Place of Business:

955 N W 17TH AVENUE
BLDG. D
DEL RAY, FL 33445

Current Mailing Address:

6639 EMBASSY COURT
MAUMEE, OH 43537

New Mailing Address:

955 N W 17TH AVENUE
BLDG. D
DEL RAY, FL 33445

FEI Number: 65-0965578 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BERT R. OLIVER, P.A.
955 NW 17TH AVENUE - BUILDING D
DELRAY BEACH, FL 33445 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 ( ) Delete
Name: POWELL, JOHN
Address: 6639 EMBASSY COURT
City-St-Zip: MAUMEE, OH 43537

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: POWELL, JOHN
Address: 6639 EMBASSY COURT
City-St-Zip: MAUMEE, OH 43537

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: JOHN POWELL MR 06/26/2009

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