

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000007598

FILED
May 27, 2009
Secretary of State

Entity Name: RICHMOND SQUARE ASSOCIATES, L.L.C.

Current Principal Place of Business:

249 JOHN KNOX ROAD
STE 100
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

3491-11 THOMASVILLE ROAD STE 222
TALLAHASSEE, FL 32308

New Mailing Address:

P.O. BOX 10033
TALLAHASSEE, FL 32302

FEI Number: 59-3625156 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:

O'LEARY, PATRICK G
3491-11 THOMASVILLE ROAD, SUITE 222
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

O'LEARY, PATRICK G
249 JOHN KNOX ROAD
SUITE 100
TALLAHASSEE, FL 32303 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:

05/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: O'LEARY, PATRICK G
Address: 3491-11 THOMASVILLE ROAD, SUITE 222
City-St-Zip: TALLAHASSEE, FL 32309

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: O'LEARY, PATRICK G
Address: P.O. BOX 10033
City-St-Zip: TALLAHASSEE, FL 32302

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: PATRICK G. O'LEARY

MGR

05/27/2009

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