

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000002388

**FILED**  
**Jan 11, 2010**  
**Secretary of State**

**Entity Name:** SAMPLE EXECUTIVE CENTER, LLC

**Current Principal Place of Business:**

190 NORTH COMPASS DR.  
FT. LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

190 NORTH COMPASS DR.  
FT. LAUDERDALE, FL 33308

**New Mailing Address:**

**FEI Number:** 20-0918374

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

COPPOLA, PATRICE  
190 NORTH COMPASS DRIVE  
FT. LAUDERDALE, FL 33308 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:** MGRP  
**Name:** COPPOLA, ROBERT  
**Address:** 190 NORTH COMPASS DRIVE  
**City-St-Zip:** FT. LAUDERDALE, FL 33308

**Title:** MGRT  
**Name:** COPPOLA, PATRICE  
**Address:** 190 NORTH COMPASS DRIVE  
**City-St-Zip:** FORT LAUDERDALE, FL 33308

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:** ROBERT COPPOLA

MBR

01/11/2010

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