

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000004325

Entity Name: THE BOYKIN GROUP, LLC

FILED  
Mar 30, 2009  
Secretary of State

**Current Principal Place of Business:**

8015 W KENTON CIRCLE SUITE 220  
HUNTERSVILLE, NC 28078

**New Principal Place of Business:**

**Current Mailing Address:**

8015 W KENTON CIRCLE SUITE 220  
HUNTERSVILLE, NC 28078

**New Mailing Address:**

FEI Number: 20-5524231

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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: BOYKIN, ROBERT W  
Address: 8015 W KENTON CIRCLE SUITE 220  
City-St-Zip: HUNTERSVILLE, NC 28078

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BOYKIN, ROBERT W  
Address: 8015 W KENTON CIRCLE SUITE 220  
City-St-Zip: HUNTERSVILLE, NC 28078

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: ROBERT W BOYKIN

MGR

03/30/2009

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