

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000015215

Entity Name: SEER ANALYTICS, LLC

FILED
Apr 24, 2008
Secretary of State

Current Principal Place of Business:

518 N. TAMPA STREET, STE 250
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

2506 EDGEWOOD RD.
TAMPA, FL 33609

New Mailing Address:

FEI Number: 59-3685869

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAZARUS, WILLIAM
2506 EDGEWOOD ROAD
TAMPA, FL 33609 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: LAZARUS, WILLIAM
Address: 518 N. TAMPA ST., STE 250
City-St-Zip: TAMPA, FL

Title: MGR () Delete
Name: SHAPIRO, JOAN
Address: 5614 S DORCHESTER
City-St-Zip: CHICAGO, IL

Title: MGR () Delete
Name: PRESSNER, ROBERT
Address: 13601 TWIN LAKES LANE
City-St-Zip: TAMPA, FL

Title: MGRM () Delete
Name: CONNOLLY, MIDGE
Address: 14107 KNOTTINGSLEY ROAD
City-St-Zip: TAMPA, FL

Title: MGRM () Delete
Name: LAZARUS, IRIS
Address: 2506 EDGEWOOD ROAD
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES:

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

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

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

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: IRIS LAZARUS

MGRM

04/24/2008

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