

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000002282

**FILED**  
**Mar 22, 2007**  
**Secretary of State**

**Entity Name:** A2Z HOSPITALITY MANAGEMENT, LLC

**Current Principal Place of Business:**

2033 MAIN STREET  
SUITE 500  
SARASOTA, FL 34237

**New Principal Place of Business:**

5197 SOUTH SUNNYDALE CIRCLE  
SARASOTA, FL 34233

**Current Mailing Address:**

2033 MAIN STREET  
SUITE 500  
SARASOTA, FL 34237

**New Mailing Address:**

5197 SOUTH SUNNYDALE CIRCLE  
SARASOTA, FL 34233

FEI Number: 20-2432143

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PFLUGNER, J GEOFFREY  
2033 MAIN STREET  
SUITE 500  
SARASOTA, FL FL US

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

ZACCARI, JOHN J MR  
5197 SOUTH SUNNYDALE CIRCLE  
SARASOTA, FL FL 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: JOHN J ZACCARI

03/22/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ARNSBY, DAVID B  
Address: 2033 MAIN STREET, STE. 500  
City-St-Zip: SARASOTA, FL 34237

Title: MGR ( ) Delete  
Name: ZACCARI, JOHN  
Address: 2033 MAIN STREET, STE. 500  
City-St-Zip: SARASOTA, FL 34237

**ADDITIONS/CHANGES:**

Title: CEO (X) Change ( ) Addition  
Name: ZACCARI, JOHN J MR.  
Address: 5197 SOUTH SUNNYDALE CIRCLE  
City-St-Zip: SARASOTA, FL 34233

Title: MGR (X) Change ( ) Addition  
Name: ARNSBY, DAVID B  
Address: 5197 SOUTH SUNNYDALE CIRCLE  
City-St-Zip: SARASOTA, FL 34233

I hereby certify that the information supplied with this filing does not qualify for the 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 J ZACCARI

CEO

03/22/2007

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