

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jan 05, 2012
Secretary of State

Entity Name: TAVERNIER CAPITAL PARTNERS, LLC

Current Principal Place of Business:

4899 BELFORT RD, STE 130
JACKSONVILLE, FL 32256 11

New Principal Place of Business:

Current Mailing Address:

4899 BELFORT RD, STE 130
JACKSONVILLE, FL 32256 11

New Mailing Address:

FEI Number: 20-5933817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLODIG, GREGORY J
100 W. CYPRESS CREEK ROAD
SUITE 700
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

GREENSPOON MARDER, P.A.
100 W. CYPRESS CREEK ROAD
SUITE 700
FORT LAUDERDALE, FL 33309 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: GREGORY J. BLODIG

01/05/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: MOCZUL, ALLEN
Address: 4899 BELFORT ROAD, SUITE 130
City-St-Zip: JACKSONVILLE, FL 32256

Title: MGR
Name: OWNBY, THOMAS J
Address: 101 E KENNEDY BLVD, SUITE 1430
City-St-Zip: TAMPA, FL 33602

Title: MGR
Name: CALLAHAN, LEWIS R
Address: 101 E KENNEDY BLVD, SUITE 1430
City-St-Zip: TAMPA, FL 33602

Title: MGR
Name: SCHRAGE, JOSEPH
Address: 5201 BLUE LAGOON DRIVE, SUITE 570
City-St-Zip: MIAMI, FL 33126

Title: MGR
Name: SUMNER, MARC
Address: 300 S. ORANGE AVENUE, SUITE 150
City-St-Zip: ORLANDO, FL 32801

Title: MGR
Name: HOPPENSTEIN, SAUL
Address: 2255 GLADES ROAD, SUITE 236W
City-St-Zip: BOCA RATON, FL 33431

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: ALLEN MOCZUL

MGR

01/05/2012

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