

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000012083

FILED
Mar 04, 2009
Secretary of State

Entity Name: PANTHER CAPITAL PARTNERS LLC

Current Principal Place of Business:

333 S. MIAMI AVE., SUITE 150
MIAMI, FL 33130

New Principal Place of Business:

333 S. MIAMI AVE.,
SUITE 150
MIAMI, FL 33130 US

Current Mailing Address:

333 S. MIAMI AVE., SUITE 150
MIAMI, FL 33130

New Mailing Address:

333 S. MIAMI AVE.,
SUITE 150
MIAMI, FL 33130 US

FEI Number: 32-0260804

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: KRINSKY, JEFF
Address: 333 S. MIAMI AVE., SUITE 150
City-St-Zip: MIAMI, FL 33130

Title: MGRM () Delete
Name: SIRLIN, DANIEL
Address: 333 S. MIAMI AVE., SUITE 150
City-St-Zip: MIAMI, FL 33130

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KRINSKY, JEFF
Address: 333 S. MIAMI AVE., SUITE 150
City-St-Zip: MIAMI, FL 33130 US

Title: MGRM (X) Change () Addition
Name: SIRLIN, DANIEL
Address: 333 S. MIAMI AVE., SUITE 150
City-St-Zip: MIAMI, FL 33130 US

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: DANIEL SIRLIN

MGRM

03/04/2009

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