2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000004753

Entity Name: ALEXSAM T, LLC

City-St-Zip:

NEW YORK,, NY 10019

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 14175 ICOT BLVD., STE. 100 CLEARWATER, FL 33760 **Current Mailing Address: New Mailing Address:** 14175 ICOT BLVD., STE. 100 CLEARWATER, FL 33760 FEI Number: 20-1217609 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: INGHRAM, BOB 14175 ICOT BLVD., STE. 100 CLEARWATER, FL 33760 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: ADDITIONS/CHANGES: Title: () Change () Addition () Delete JOHNSON, DAN Name: Name: Address: 14175 ICOT BLVD., STE. 100 Address: City-St-Zip: CLEARWATER, FL 33760 City-St-Zip: Title: MGR () Delete Title: () Change () Addition REDMOND, JOHN Name: Name: Address: 14175 ICOT BLVD., STE, 100 Address: City-St-Zip: CLEARWATER, FL 33760 City-St-Zip: Title: MGR () Delete Title: () Change () Addition TROSCLAIR, LOU T Name: Name: 25 COLUMBUS CIRCLE 65-C Address: Address:

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.

City-St-Zip:

SIGNATURE: JOHN REDMOND MGR 04/15/2009