

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000000132

Entity Name: ADVISORS EXCEL, LLC

FILED  
Mar 12, 2010  
Secretary of State

**Current Principal Place of Business:**

825 S. KANSAS AVENUE, SUITE 510  
TOPEKA, KS 66612

**New Principal Place of Business:**

1300 SW ARROWHEAD RD, SUITE 200  
TOPEKA, KS 66604

**Current Mailing Address:**

825 S. KANSAS AVENUE, SUITE 510  
TOPEKA, KS 66612

**New Mailing Address:**

1300 SW ARROWHEAD RD, SUITE 200  
TOPEKA, KS 66604

FEI Number: 20-2111111

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FORM-A CORP  
4400 PGA BLVD, SUITE 900  
PALM BEACH GARDENS, FL 33410 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: MGR  
Name: CALLANAN, DAVID MANAGER  
Address: 1300 SW ARROWHEAD RD, SUITE 200  
City-St-Zip: TOPEKA, KS 66604

Title: MGR  
Name: FOSTER, CODY G MANAGER  
Address: 1300 SW ARROWHEAD RD, SUITE 200  
City-St-Zip: TOPEKA, KS 66604

Title: MGR  
Name: THOMPSON, DEREK J MANAGER  
Address: 1300 SW ARROWHEAD RD, SUITE 200  
City-St-Zip: TOPEKA, KS 66604

Title: MEMB  
Name: DDC HOLDINGS, LLC  
Address: 1300 SW ARROWHEAD RD, SUITE 200  
City-St-Zip: TOPEKA, KS 66604

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: DAVID CALLANAN

MGR

03/12/2010

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