2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 20, 2007
Secretary of State

DOCUMENT# M04000004753

Entity Name: ALEXSAM T, LLC

Current Principal Place of Business:

14175 ICOT BLVD., STE. 100
CLEARWATER, FL 33760

New Principal Place of Business:

Current Mailing Address:

14175 ICOT BLVD., STE. 100
CLEARWATER, FL 33760

New Mailing Address:

FEI Number: 20-1217609 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

INGHRAM, BOB
14175 ICOT BLVD., STE. 100
CLEARWATER, FL 33760 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 ( ) Delete
Name: JOHNSON, DAN
Address: 14175 ICOT BLVD., STE. 100
City-St-Zip: CLEARWATER, FL 33760

Title: MGR ( ) Delete
Name: REDMOND, JOHN
Address: 14175 ICOT BLVD., STE. 100
City-St-Zip: CLEARWATER, FL 33760

Title: MGR ( ) Delete
Name: TROSCLAIR, LOU T
Address: 8 ISLA BAHIA DR.
City-St-Zip: FT. LAUDERDALE, FL 33314

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change ( ) Addition
Name: TROSCLAIR, LOU T
Address: 25 COLUMBUS CIRCLE 65-C
City-St-Zip: NEW YORK,, NY 10019

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: DANIEL JOHNSON MGR 03/20/2007

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