

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000007259

FILED
Apr 28, 2008
Secretary of State

Entity Name: CONNEXIA CONSULTING, LLC

Current Principal Place of Business:

1900 N.W. CORPORATE BLVD.
EAST BUILDING, SUITE 300
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

1900 N.W. CORPORATE BLVD.
EAST BUILDING, SUITE 300
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 65-1132482 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEIMARK, CORT A
800 CORPORATE DRIVE
SUITE 420
FT. LAUDERDALE, FL 33334 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: CINI, ROBERT S
Address: 1900 NW CORPORATE BLVD STE 300 EAST
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM () Delete
Name: LEWIN, GERALD R
Address: 1900 NW CORPORATE BLVD STE 300 EAST
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM () Delete
Name: GOLDSTEIN, DONALD J
Address: 1900 NW CORPORATE BLVD STE 300 EAST
City-St-Zip: BOCA RATON, FL 33431

ADDITIONS/CHANGES:

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

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

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

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: ROBERT S. CINI MGRM 04/28/2008

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