

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000018001

Entity Name: C2FS-MACALPINE LLC

**FILED**  
**Sep 23, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

9600 KOGER BLVD  
105  
SAINT PETERSBURG, FL 33702

**New Principal Place of Business:**

**Current Mailing Address:**

9600 KOGER BLVD  
105  
SAINT PETERSBURG, FL 33702

**New Mailing Address:**

FEI Number: 52-2369310

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLEETING, ROBERT  
9600 KOGER BLVD  
105  
SAINT PETERSBURG, FL 33702 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  
Name: FLEETING, ROBERT  
Address: 9600 KOGER BLVD., SUITE 105  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: MGRM  
Name: CHADWICK, HARRY  
Address: 9600 KOGER BLVD., SUITE 105  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: MGRM  
Name: HANSEN, THOMAS  
Address: 9600 KOGER BLVD., SUITE 105  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: MGRM  
Name: GASKIN, MICHAEL  
Address: 9600 KOGER BLVD STE 105  
City-St-Zip: SAINT PETERSBURG, FL 33702

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: ROBERT FLEETING

MR.

09/23/2010

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