

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000011647

**FILED**  
**Apr 26, 2010**  
**Secretary of State**

**Entity Name:** EWING CAPITAL PARTNERS, LLC

**Current Principal Place of Business:**

50 NORTH LAURA STREET, SUITE 3625  
JACKSONVILLE, FL 32202

**New Principal Place of Business:**

**Current Mailing Address:**

50 NORTH LAURA STREET, SUITE 3625  
JACKSONVILLE, FL 32202

**New Mailing Address:**

**FEI Number:** 65-1185719

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BISHOP, BENJAMIN C JR.  
50 NORTH LAURA STREET, SUITE 3625  
JACKSONVILLE, FL 32202 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:** C  
**Name:** BISHOP, BENJAMIN C  
**Address:** 50 N. LAURA ST. STE. 3625  
**City-St-Zip:** JACKSONVILLE, FL 32202

**Title:** P  
**Name:** JACKSON, DAVID W JR  
**Address:** 200 S TYRON ST SUITE 700  
**City-St-Zip:** CHARLOTTE, NC 28202

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:** BENJAMIN C. BISHOP JR.

C

04/26/2010

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