

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000014349

Entity Name: SALIENT LLC

FILED
Apr 08, 2009
Secretary of State

Current Principal Place of Business:

2902 HYDE PARK ST.
SARASOTA, FL 34239

New Principal Place of Business:

5001 LAKEWOOD RANCH BLVD N
SUITE 600
SARASOTA, FL 34240

Current Mailing Address:

2902 HYDE PARK ST.
SARASOTA, FL 34239

New Mailing Address:

5001 LAKEWOOD RANCH BLVD N
SUITE 600
SARASOTA, FL 34240

FEI Number: 56-2353612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SESSIONS, DAVID E
2902 HYDE PARK STREET
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

SESSIONS, DAVID E
5001 LAKEWOOD RANCH BLVD N
SUITE 600
SARASOTA, FL 34240 US

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: DAVID E. SESSIONS

04/08/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SESSIONS, DAVID
Address: 2902 HYDE PARK STREET
City-St-Zip: SARASOTA, FL 34239 US

Title: MGRM () Delete
Name: LACIVITA, JOHN F
Address: 2902 HYDE PARK STREET
City-St-Zip: SARASOTA, FL 34239

Title: MGRM () Delete
Name: SIMONDS, WARREN G PH.D
Address: 2902 HYDE PARK ST.
City-St-Zip: SARASOTA, FL 34239

Title: MGRM () Delete
Name: FORMELLA, JOSEPH A
Address: 2902 HYDE PARK ST.
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SESSIONS, DAVID E
Address: 5001 LAKEWOOD RANCH BLVD N
City-St-Zip: SARASOTA, FL 34240 US

Title: MGRM (X) Change () Addition
Name: LACIVITA, JOHN F
Address: 5001 LAKEWOOD RANCH BLVD N
City-St-Zip: SARASOTA, FL 34240

Title: MGRM (X) Change () Addition
Name: SIMONDS, WARREN G PH.D
Address: 5001 LAKEWOOD RANCH BLVD N
City-St-Zip: SARASOTA, FL 34240

Title: MGRM (X) Change () Addition
Name: FORMELLA, JOSEPH A
Address: 5001 LAKEWOOD RANCH BLVD N
City-St-Zip: SARASOTA, FL 34240

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: DAVID E. SESSIONS

MGRM

04/08/2009

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