

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000016799

**FILED**  
**Apr 09, 2009**  
**Secretary of State**

**Entity Name:** SUSSEX MANAGEMENT, LLC

**Current Principal Place of Business:**

767 TROPICAL CIRCLE  
SARASOTA, FL 34242

**New Principal Place of Business:**

4029 BEE RIDGE RD  
#5111  
SARASOTA, FL 34233

**Current Mailing Address:**

767 TROPICAL CIRCLE  
SARASOTA, FL 34242

**New Mailing Address:**

4029 BEE RIDGE RD  
#5111  
SARASOTA, FL 34233

FEI Number: 16-1667143

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SUSSEX GROUP LLC  
4630 5TH ST WEST UNIT 3  
BRADENTON, FL 34207 US

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

SUSSEX GROUP LLC  
4029 BEE RIDGE RD  
#5111  
SARASOTA, FL 34233 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: \_\_\_\_\_

04/09/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: FLESSNER, KEVIN  
Address: 767 TROPICAL CIRCLE  
City-St-Zip: SARASOTA, FL 34242

**ADDITIONS/CHANGES:**

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: KEVIN FLESSNER

MGRM

04/09/2009

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