

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031381

FILED
Jul 02, 2008
Secretary of State

Entity Name: SPARTAN MANAGEMENT, LLC

Current Principal Place of Business:

400 NORTH MILLS AVENUE
ORLANDO, FL 328035722 US

New Principal Place of Business:

Current Mailing Address:

400 NORTH MILLS AVENUE
ORLANDO, FL 328035722 US

New Mailing Address:

FEI Number: 20-0169907 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MURBACH, ROGER S M.D.
400 NORTH MILLS AVENUE
ORLANDO, FL 328035722 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: D () Delete
Name: MURBACH, ROGER S
Address: 1449 KELSO BOULEVARD
City-St-Zip: WINDERMERE, FL 34786

Title: D () Delete
Name: APPELBLATT, STEVE
Address: 1331 BENEVOLENT ST
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: STOCKTON, EDWARD
Address: 9062 POINT CYPRESS
City-St-Zip: ORLANDO, FL 32836

Title: D () Delete
Name: GEWOLB, JAY
Address: 1759 COCOPLUM COURT
City-St-Zip: LONGWOOD, FL 32779

Title: D () Delete
Name: SMITH, DAVID
Address: 9138 BAY POINT DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: D () Delete
Name: STEWART, MATTHEW
Address: 1922 BENHURST PLACE
City-St-Zip: MAITLAND, FL 32751

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:

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

Title: () Change () Addition
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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: NANCY BYLL-PAUL

ADM

07/02/2008

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