## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L03000048744

1. Entity Name

ADULLAM STRATEGY, LLC



FILED Apr 24, 2008 08:00 AN Secretary of State

Principal Place of Business

16204 TALA VERA DE AVILA Tampa, Fl. 33613 Mailing Address

16204 TALA VERA DE AVILA TAMPA. FL. 33613



DO NOT WRITE IN THIS SPACE

04112008 No Chg-LLC CR2E

CR2E083 (12/07)

4. FEI Number 20-0675595

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MILLER, RANDELL ESQ HINES, NORMAN, HINES & SULLIVAN, P.L. 315 SOUTH HYDE PARK AVENUE TAMPA, FL 33606

## DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE.

Signature, lyoed or printed name of registered agent and life if applicable

(NOTE. Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000920254 05/14/08-80037-004 138.75

9.	MANAGING MEMBERS/MANAGERS
TITLE  NAME STREET ADDRESS CITY-S1-ZIP  TITLE  NAME STREET ADDRESS CITY-S1-ZIP	MGR AUGUSTINE, STEVEN J 16204 TALAVERA DE AVILA TAMPA, FL 33613
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	
<ol> <li>I hereby certify that the information supplied with this filing does not qualify for the ex</li> </ol>	

## DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my 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 his report as required by Chapter 608, Florida Statutes.

STeuc

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED N

Ken AUGUSTINE

ANAGING MEKRER, OR AUTHORIZED REPRESENTATIVE

4-17-08

Daytime Phone #