2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 05, 2008
Secretary of State

DOCUMENT# L04000014261

Entity Name: THE ADAM ROBINSON TEAM, LLC

Current Principal Place of Business:

5039 OCEAN BLVD.
SARASOTA, FL 34242

New Principal Place of Business:

Current Mailing Address:

5039 OCEAN BLVD.
SARASOTA, FL 34242

New Mailing Address:

FEI Number: 20-0766645 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROBINSON, ADAM
5039 OCEAN BLVD.
SARASOTA, FL 34242 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:	PRES	( ) Delete
Name:	ROBINSON, ERIC L	
Address:	5039 OCEAN BLVD.	
City-St-Zip:	SARASOTA, FL 344242 US	
Title:	SECR	( ) Delete
Name:	MANVILLE, CAROL	
Address:	1450 DOGWOOD DR	
City-St-Zip:	SARASOTA, FL 34232	
Title:	MGR	( ) Delete
Name:	NORWINE, ROBERT	
Address:	301 JOHN RINGLING BLVD	
City-St-Zip:	SARASOTA, FL 34236	

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:	

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: CAROL MANVILLE SECR 02/05/2008

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