

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000025345

**FILED**  
**Apr 21, 2010**  
**Secretary of State**

**Entity Name:** SAA MANAGEMENT COMPANY, L.L.C.

**Current Principal Place of Business:**

1431 ORANGE CAMP ROAD  
SUITE 116  
DELAND, FL 32724 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 953544  
LAKE MARY, FL 327953544 US

**New Mailing Address:**

**FEI Number:** 03-0558492

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TRYCON, INC.  
1431 ORANGE CAMP ROAD  
SUITE 116  
DELAND, FL 32724 US

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

TRYCON MANAGEMENT & LEASING, INC.  
1431 ORANGE CAMP ROAD  
SUITE 116  
DELAND, FL 32724 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: TRYCON MANAGEMENT & LEASING, INC.

04/21/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LUBINSKY, TERRY  
Address: 1431 ORANGE CAMP ROAD, SUITE 116  
City-St-Zip: DELAND, FL 32724 US

Title: MGRM  
Name: CANNON, FRANK J  
Address: 1431 ORANGE CAMP ROAD, SUITE 116  
City-St-Zip: DELAND, FL 32724 US

I hereby 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: FRANK CANNON

MGRM

04/21/2010

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