

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000034921

Entity Name: SUMMIT PARTNERS, LLC

**FILED**  
**Jan 15, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4440 N. OCEAN BLVD.  
#2  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 590006  
FT. LAUDERDALE, FL 33359

**New Mailing Address:**

PO BOX 51617  
LIGHTHOUSE POINT, FL 33074

FEI Number: 33-1096311

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NAPPI, DONALD  
4440 N. OCEAN BLVD.  
#2  
DELRAY BEACH, FL 33483 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: MGRM  
Name: DONALD, NAPPI  
Address: PO BOX 51617  
City-St-Zip: LIGHTHOUSE POINT, FL 33074

Title: MGRM  
Name: SHARI, KAVALLIN  
Address: PO BOX 51617  
City-St-Zip: LIGHTHOUSE POINT, FL 33074

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: DONALD NAPPI

MGRM

01/15/2010

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