

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046588

FILED  
Apr 30, 2007  
Secretary of State

Entity Name: VERSAGGI ARLINGTON, LLC

**Current Principal Place of Business:**

511 S. WESTLAND AVE., #16  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

511 S. WESTLAND AVE., #16  
TAMPA, FL 33606

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

JEFFRIES, DAVID M  
101 EAST KENNEDY BOULEVARD  
SUITE 3000  
TAMPA, FL 33602 US

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

JEFFRIES, DAVID M  
1227 N. FRANKLIN STREET  
TAMPA, FL 33602 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: DAVID M JEFFRIES

04/30/2007

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: VERSAGGI, RUSSELL S  
Address: 511 WESTLAND AVENUE #16  
City-St-Zip: TAMPA, FL 33606

Title: MGR ( ) Delete  
Name: PREVATT, MYRON  
Address: 511 WESTLAND AVENUE #16  
City-St-Zip: TAMPA, FL 33606

**ADDITIONS/CHANGES:**

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: RUSSELL VERSAGGI

MGRM

04/30/2007

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