

2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L04000050013

FILED
Jun 04, 2008
Secretary of State**Entity Name:** PRO MANAGEMENT, LLC**Current Principal Place of Business:**10130 NORTHLAKE BLVD
STE 214-317
WEST PALM BEACH, FL 33412 US**New Principal Place of Business:****Current Mailing Address:**10130 NORTHLAKE BLVD
STE 214-317
WEST PALM BEACH, FL 33412 US**New Mailing Address:****FEI Number:** 20-1331688**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MOORE, GORDON P
10130 NORTHLAKE BLVD
STE 214-317
WEST PALM BEACH, FL 33412 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 () Delete
Name: MOORE, GORDON P
Address: 10130 NORTHLAKE BLVD STE 214-317
City-St-Zip: WEST PALM BEACH, FL 33412**Title:** MGRM (X) Delete
Name: BLAKESLEE, TIMOTHY
Address: 5655 SW EVANS
City-St-Zip: STUART, FL 34997**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: GORDON P MOORE

MMBR

06/04/2008

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