

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000061787

Entity Name: SAGO FINANCIAL, LLC

**FILED**  
**Mar 09, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2614 JAYS NEST LANE  
HOLIDAY, FL 34691

**New Principal Place of Business:**

5804 JEFFERSON PARK DR  
TAMPA, FL 33625

**Current Mailing Address:**

2614 JAYS NEST LANE  
HOLIDAY, FL 34691

**New Mailing Address:**

5804 JEFFERSON PARK DR  
TAMPA, FL 33625

FEI Number: 20-1517642

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOFF, GLENN T  
2614 JAYS NEST LANE  
HOLIDAY, FL 34691 US

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

GOFF, GLENN T  
5804 JEFFERSON PARK DR.  
TAMPA, FL 33625 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:

03/09/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GOFF, GLENN T  
Address: 5804 JEFFERSON PARK DR  
City-St-Zip: TAMPA, FL 33625

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: GLENN T GOFF

MGRM

03/09/2010

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