## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000082553

Entity Name: FLORIDA CIRCUIT HOLDINGS, LLC

FILED Jan 08, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1055 SHOTGUN ROAD 1669 NW 144TH TERRACE #211

SUNRISE, FL 33326 SUNRISE, FL 33323

**Current Mailing Address: New Mailing Address:** 

1669 NW 144TH TERRACE #211 1055 SHOTGUN ROAD

SUNRISE, FL 33326 SUNRISE, FL 33323

FEI Number: 42-1651933 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

HEGY, MICHAEL A HEGY, MICHAEL A 1055 SHOTGUN ROAD 1669 NW 144TH TERRACE #211 SUNRISE, FL 33326 SUNRISE, FL 33323

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: 01/08/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete (X) Change ( ) Addition HEGY, MICHAEL A HEGY, MICHAEL A Name: Name: Address:

1055 SHOTGUN ROAD Address: 1669 NW 144TH TERRACE #211

City-St-Zip: SUNRISE, FL 33326 City-St-Zip: SUNRISE, FL 33323

Title: MGRM ( ) Delete Title: () Change () Addition Name: Name:

WETTLAUFER, WILLIAM H Address: 2449 POINCIANA DRIVE Address: City-St-Zip: WESTON, FL 33327 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.

**PRES** SIGNATURE: MICHAEL A. HEGY 01/08/2008