

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000022926

Entity Name: PREMIERE CENTER, LLC

FILED  
Jan 26, 2009  
Secretary of State

**Current Principal Place of Business:**

4801 N. HABANA AVE  
TAMPA, FL 33614 US

**New Principal Place of Business:**

**Current Mailing Address:**

4801 N. HABANA AVE  
TAMPA, FL 33614 US

**New Mailing Address:**

FEI Number: 74-3141216

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

NRAI SERVICES, INC.  
4801 N HABANA AVE  
TAMPA, FL 33614 US

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

BAILEY, AMY E  
4801 N HABANA AVE  
TAMPA, FL 33614 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: AMY E. BAILEY

01/26/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WELDEN, LENORA  
Address: 4801 N. HABANA AVE  
City-St-Zip: TAMPA, FL 33614 US

Title: VP ( ) Delete  
Name: WELDEN, STEPHEN W MD  
Address: 4801 N. HABANA AVE  
City-St-Zip: TAMPA, FL 33614

**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: LENORA WELDEN

MGRM

01/26/2009

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