2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2008
Secretary of State

DOCUMENT# L05000037638

Entity Name: CDE, LLC

Current Principal Place of Business:

5509 W GRAY STREET
SUITE 201
TAMPA, FL 33609

New Principal Place of Business:

10901 CORPORATE CIRCLE NORTH
SUITE A
ST PETERSBURG, FL 33716 US

Current Mailing Address:

5509 W GRAY STREET
SUITE 201
TAMPA, FL 33609

New Mailing Address:

10901 CORPORATE CIRCLE NORTH
SUITE A
ST PETERSBURG, FL 33716 US

FEI Number: 20-2767913 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

EAST, CLARK D
5509 W GRAY STREET
SUITE 201
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

EAST, CLARK D
10901 CORPORATE CIRCLE NORTH
SUITE A
ST PETERSBURG, FL 33716 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: CLARK D EAST 05/01/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: EAST, CLARK D
Address: 5509 W GRAY STREET SUITE 201
City-St-Zip: TAMPA, FL 33609 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: EAST, CLARK D
Address: 10901 CORPORATE CIRCLE NORTH STE A
City-St-Zip: ST PETERSBURG, FL 33716 US

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: CLARK D EAST MGR 05/01/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date