

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000042797

Entity Name: PATRIOT CAPITAL, LLC

FILED
Jan 12, 2007
Secretary of State

Current Principal Place of Business:

8130 LAKE WOOD MAIN ST
SUITE 208
BRADENTON, FL 34202

Current Mailing Address:

8130 LAKE WOOD MAIN ST
SUITE 208
BRADENTON, FL 34202

New Principal Place of Business:

8130 LAKEWOOD MAIN STEET
SUITE 208
BRADENTON, FL 34202

New Mailing Address:

8130 LAKEWOOD MAIN STEET
SUITE 208
BRADENTON, FL 34202

FEI Number: 20-2769913

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DORNEY, ROB
8130 LAKEWOOD MAIN ST
SUITE 208
BRADENTON, FL 34202 US

Name and Address of New Registered Agent:

ROSENBERG, DAVID H ESQ.
8130 LAKEWOOD MAIN ST
SUITE 208
BRADENTON, FL 34202 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: DAVID H. ROSENBERG

01/12/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: DORNEY, ROBERT J
Address: 50 CHURCH STREET
City-St-Zip: EASTON, MA 02375

Title: MGRM () Delete
Name: CAMPBELL, JOHN
Address: 16 LACKNYLIPPER LN
City-St-Zip: FORESTDALE, MA 02644

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 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: ROB DORNEY

MGRM

01/12/2007

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