

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000058091

FILED  
Apr 14, 2008  
Secretary of State

Entity Name: ALTERNATIVE CONCEPTS, L.L.C.

**Current Principal Place of Business:**

4051 BARRANCAS AVENUE, SUITE #G270  
PENSACOLA, FL 32501

**New Principal Place of Business:**

**Current Mailing Address:**

4051 BARRANCAS AVENUE, SUITE #G270  
PENSACOLA, FL 32501

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

BORDELON & SCHULTZ LAW FIRM, P.L.  
2721 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563 US

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

KERRY ANNE SCHULTZ, ESQUIRE  
2721 GULF BREEZE PARKWAY  
GULF BREEZE, FL 32563 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: KERRY ANNE SCHULTZ, ESQUIRE

04/14/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: WEISEL, CHRISTOPHER M  
Address: 4051 BARRANCAS AVENUE, SUITE #G270  
City-St-Zip: PENSACOLA, FL 32501

Title: MGRM (X) Delete  
Name: SCHURRER, LOUIS S  
Address: 407 ALBA  
City-St-Zip: PENSACOLA, FL 32507

**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: CHRISTOPHER M. WEISEL

MGRM

04/14/2008

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