

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062254

FILED
Feb 17, 2007
Secretary of State

Entity Name: LAZARUS LLC

Current Principal Place of Business:

1308 GLICKSTEIN CT
NEPTUNE BEACH, FL 32266 US

New Principal Place of Business:

4836 ATLANTIC BLVD STE 202
JACKSONVILLE, FL 32207 US

Current Mailing Address:

1308 GLICKSTEIN CT
NEPTUNE BEACH, FL 32266 US

New Mailing Address:

4836 ATLANTIC BLVD STE 202
JACKSONVILLE, FL 32207 US

FEI Number: 20-3041834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

XPRESS EFILE INC
1511 PENMAN RD STE B
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

MARK OBRIEN
4836 ATLANTIC BLVD STE 202
JACKSONVILLE, FL 32207 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: MARK OBRIEN

02/17/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OBRIEN, MARK
Address: 4836 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: MGRM (X) Delete
Name: ODOM, MINDY M
Address: 1308 GLICKSTEIN CT
City-St-Zip: NEPTUNE BEACH, FL 32266 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: OBRIEN, MARK
Address: 4836 ATLANTIC BLVD STE 202
City-St-Zip: JACKSONVILLE, FL 32207 US

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: MARK OBRIEN

MGR

02/17/2007

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