

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000073116

FILED  
Sep 09, 2008  
Secretary of State

**Entity Name:** ALEXANDRA CONNOLLY PHOTOGRAPHICS, LLC

**Current Principal Place of Business:**

10470 SE JUPITER NARROWS DR.  
HOBE SOUND, FL 33455

**New Principal Place of Business:**

**Current Mailing Address:**

10470 SE JUPITER NARROWS DR.  
HOBE SOUND, FL 33455

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:**

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

CONNOLLY, LYNNE  
10470 SE JUPITER NARROWS DR.  
HOBE SOUND, FL 33455 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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CONNOLLY, LYNNE  
Address: 10470 JUPITER NARROWS  
City-St-Zip: HOBE SOUND, FL 33455 US

**ADDITIONS/CHANGES:**

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: LYNNE CONNOLLY

MGRM

09/09/2008

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