


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 18, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000077227</b> 1. Entity Name <b>COOPER CAPITAL MANAGEMENT, LLC</b>	
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Principal Place of Business <b>1511 SWANN AVENUE TAMPA, FL 33606</b>	Mailing Address <b>1511 SWANN AVENUE TAMPA, FL 33606</b>
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**DO NOT WRITE IN THIS SPACE**



02012008No Chg-LLC

CR2E083 (12/07)

4. FEI Number <b>20-3423609</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  <b>CONNERY, JOHN C JR. 101 EAST KENNEDY BOULEVARD, SUITE 3700 TAMPA, FL 33602</b>
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

000000930648  
02/26/08-80092-010 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COOPER, III, FRANK E 840 S. DELAWARE AVE TAMPA, FL 336062915
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**    
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #