

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000080661

FILED
Jul 18, 2008
Secretary of State

Entity Name: LUX, LLC

Current Principal Place of Business:

618 NW 2ND STREET
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

618 NW 2ND STREET
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number: 32-0156984 FEI Number Applied For () FEI Number Not Applicable () 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:

WRIGHT, SCOTT
618 NW 2ND STREET
GAINESVILLE, FL 32601 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: MGR () Delete
Name: WRIGHT, SCOTT
Address: 618 NW 2ND STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: MGR () Delete
Name: WRIGHT, DANIEL
Address: 11019 N.E. STATE ROAD 26
City-St-Zip: GAINESVILLE, FL 32641

Title: MGR () Delete
Name: WALTERS, ALAN
Address: 1735 PEACHTREE ST NE
City-St-Zip: ATLANTA, GA 30309

Title: MGR () Delete
Name: BUSCH, MATTHEW
Address: 3428 ROBINHOOD ROAD
City-St-Zip: TALLAHASSEE, FL 32312

Title: MGR () Delete
Name: TSAI, CHARLES
Address: 1406 LAFAYETTE AVE
City-St-Zip: GWYNN OAK, MD 21207

Title: MGR () Delete
Name: BAYEVSKY, ALEX
Address: 266 STURGEON DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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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: SCOTT WRIGHT

MGR

07/18/2008

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