

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098005

FILED
Mar 23, 2009
Secretary of State

Entity Name: NEXT GENERATION OF FLORIDA, L.L.C.

Current Principal Place of Business:

ONE TAMPA CITY CENTER
SUITE 2600
TAMPA, FL 33602 US

New Principal Place of Business:

Current Mailing Address:

ONE TAMPA CITY CENTER
SUITE 2600
TAMPA, FL 33602 US

New Mailing Address:

FEI Number: 20-3621537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHIFINO, WILLIAM J JR.
ONE TAMPA CITY CENTER, SUITE 2600
WILLIAMS SCHIFINO MANGIONE & STEADY
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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: D () Delete
Name: SCHIFINO, WILLIAM J JR.
Address: ONE TAMPA CITY CENTER, STE. 2600
City-St-Zip: TAMPA, FL 33602 US

Title: D () Delete
Name: GONZALEZ, RAY
Address: 533 SOUTH HOWARD AVE., UNIT 8-26
City-St-Zip: TAMPA, FL 33609 US

Title: D () Delete
Name: DOLATOWSKI, ROBERT
Address: 5849 DASHER COURT
City-St-Zip: PORT RICHEY, FL 34668 US

Title: CEO () Delete
Name: GONZALEZ, RAY
Address: 533 SOUTH HOWARD AVE., UNIT 8-26
City-St-Zip: TAMPA, FL 33609 US

Title: P () Delete
Name: DOLATOWSKI, ROBERT
Address: 5849 DASHER COURT
City-St-Zip: PORT RICHEY, FL 34668 US

Title: S,T () Delete
Name: SCHIFINO, DAVID M
Address: 533 SOUTH HOWARD AVE., UNIT 8-26
City-St-Zip: TAMPA, FL 33609 US

ADDITIONS/CHANGES:

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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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: RAY GONZALEZ

D

03/23/2009

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