

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000112883

FILED
Apr 30, 2009
Secretary of State

Entity Name: BUTLER-LACKMAN TRUST OF SOUTH TAMPA, LLC

Current Principal Place of Business:

710 W. BAY STREET
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

710 W. BAY STREET
TAMPA, FL 33606

New Mailing Address:

FEI Number: 20-3826711

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LACKMAN, PETER
710 W BAY ST
TAMPA, FL 33606 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: P () Delete
Name: LACKMANN, PETER
Address: 710 W BAY ST
City-St-Zip: TAMPA, FL 33606

Title: VP () Delete
Name: BUTLER, WILLIAM
Address: 710 W BAY ST
City-St-Zip: TAMPA, FL 33606

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
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: PETER W LACKMAN

MGR

04/30/2009

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