

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000012266

FILED
Apr 02, 2009
Secretary of State

Entity Name: KENDRICK PIERCE CAPITAL/PV I, LLC

Current Principal Place of Business:

511 W BAY STREET
STE 300
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

511 W BAY STREET
STE 300
TAMPA, FL 33606

New Mailing Address:

FEI Number: 20-4398423

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSH ROSS REGISTERED AGENT SERVICES, LLC
1801 NORTH HIGHLAND AVENUE
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: MGRM () Delete
Name: KENDRICK PIERCE & CO, MPANY, INC.
Address: 511 W BAY STREET, STE 300
City-St-Zip: TAMPA, FL 33606

Title: MGRM (X) Delete
Name: GROESCHEL, NOEL M
Address: 6218 PALMA DEL MAR BLVD, UNIT 602
City-St-Zip: ST PETERSBURG, FL 33715

Title: MGRM (X) Delete
Name: HAMMER, RONALD A
Address: 1010 BAY HARBOUR PLACE
City-St-Zip: TAMPA, FL 33602

ADDITIONS/CHANGES:

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

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: KENDRICK PIERCE & COMPANY, INC.

MGRM

04/02/2009

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