

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000014534

FILED
Apr 03, 2009
Secretary of State

Entity Name: SYNOVUS UNIVERSITY INVESTMENT LLC

Current Principal Place of Business:

303 9TH STREET WEST
SUITE 201
BRADENTON, FL 34205

New Principal Place of Business:

Current Mailing Address:

303 9TH STREET WEST
SUITE 201
BRADENTON, FL 34205

New Mailing Address:

FEI Number: 20-4292465

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUMMERS, STEVE E
303 9TH STREET WEST
SUITE 201
BRADENTON, FL 34205 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: SUMMERS, STEVE E
Address: 303 9TH STREET WEST, SUITE 201
City-St-Zip: BRADENTON, FL 34205

Title: MGRM () Delete
Name: BUSKIRK, FRANK A
Address: 303 9TH STREET WEST, SUITE 201
City-St-Zip: BRADENTON, FL 34205

Title: MGRM () Delete
Name: GRAVELY, JEFFREY D
Address: 303 9TH ST W STE 201
City-St-Zip: BRADENTON, FL 34205

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: STEVE E SUMMERS

MGRM

04/03/2009

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