

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000033625

Entity Name: SANG CAPITAL GROUP, LLC

FILED  
Apr 22, 2008  
Secretary of State

## Current Principal Place of Business:

3859 WEKIVA SPRINGS RD.  
#210  
LONGWOOD, FL 32779 US

## New Principal Place of Business:

505 SWEETWATER CLUB BLVD.  
LONGWOOD, FL 32779 US

## Current Mailing Address:

3859 WEKIVA SPRINGS RD.  
#210  
LONGWOOD, FL 32779 US

## New Mailing Address:

505 SWEETWATER CLUB BLVD.  
LONGWOOD, FL 32779 US

FEI Number: 20-4617575

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALPERT, ALAN  
3859 WEKIVA SPRINGS ROAD  
SUITE 210  
LONGWOOD, FL 32779 US

## Name and Address of New Registered Agent:

ALPERT, ALAN  
505 SWEETWATER CLUB BLVD.  
LONGWOOD, FL 32779 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:

04/22/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: ORLINSKI, SCOTT  
Address: 3859 WEKIVA SPRINGS RD, #210  
City-St-Zip: LONGWOOD, FL 32779 US

Title: MGR ( ) Delete  
Name: ALPERT, ALAN  
Address: 3859 WEKIVA SPRINGS RD, #210  
City-St-Zip: LONGWOOD, FL 32779 US

Title: MGR ( ) Delete  
Name: ALPERT, NANCY  
Address: 3859 WEKIVA SPRINGS RD, #210  
City-St-Zip: LONGWOOD, FL 32779 US

Title: MGR ( ) Delete  
Name: DEVINEY, GRANT B  
Address: 3859 WEKIVA SPRINGS RD, #210  
City-St-Zip: LONGWOOD, FL 32779 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: ORLINSKI, SCOTT  
Address: 7908 MCCARRON WAY  
City-St-Zip: CHARLOTTE, NC 28215 US

Title: MGR (X) Change ( ) Addition  
Name: ALPERT, ALAN  
Address: 505 SWEETWATER CLUB BLVD.  
City-St-Zip: LONGWOOD, FL 32779 US

Title: MGR (X) Change ( ) Addition  
Name: ALPERT, NANCY  
Address: 505 SWEETWATER CLUB BLVD.  
City-St-Zip: LONGWOOD, FL 32779 US

Title: MGR (X) Change ( ) Addition  
Name: DEVINEY, GRANT B  
Address: 410 NEBRASKA  
City-St-Zip: SPINDALE, NC 28160 US

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: NANCY ALPERT

MGR

04/22/2008

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