## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000053922

Entity Name: EXECUVEST, LLC

FILED Apr 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4492 SE MURRAY COVE CIR 4390 CANDLER AVE

STUART, FL 34997 US SPRING HILL, FL 34609 US

Current Mailing Address: New Mailing Address:

4492 SE MURRAY COVE CIR 4390 CANDLER AVE

STUART, FL 34997 US SPRING HILL, FL 34609 US

FEI Number: 20-4932147 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

O'BRIEN, MATT O'BRIEN, MATT 4492 SE MURRAY COVE CIR 4390 CANDLER AVE

STUART, FL 34997 US 4390 CANDLER AVE SPRING HILL, FL 34609 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: 04/14/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

 Name:
 O'BRIEN, MATT
 Name:
 O'BRIEN, MATT

 Address:
 4492 SE MURRAY COVE CIR
 Address:
 4390 CANDLER AVE

 City-St-Zip:
 STUART, FL 34997 US
 City-St-Zip:
 SPRING HILL, FL 34609 US

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 RUEFF, RON
 Name:

 Address:
 7014 SOTRA ST
 Address:

 City-St-Zip:
 WESLEY CHAPEL, FL 33544 US
 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 RUEFF, JESSICA
 Name:

 Address:
 7014 SOTRA ST
 Address:

 City-St-Zip:
 WESLEY CHAPEL, FL 33544 US
 City-St-Zip:

Title: MGRM () Delete Title: MGRM (X) Change () Addition

Name:O'BRIEN, ELIZABETHName:O'BRIEN, ELIZABETHAddress:4492 SE MURRAY COVE CIRAddress:4390 CANDLER AVECity-St-Zip:STUART, FL 34997 USCity-St-Zip:SPRING HILL, FL 34609 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: MATT OBRIEN MGRM 04/14/2008