

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000067959

Entity Name: LEXSIGNIA, LLC

FILED
May 01, 2009
Secretary of State

Current Principal Place of Business:

9021 TOWN CENTER PARKWAY
BRADENTON, FL 34202

New Principal Place of Business:

1626 RINGLING BOULEVARD
SUITE 510
SARASOTA, FL 34236

Current Mailing Address:

9021 TOWN CENTER PARKWAY
BRADENTON, FL 34202

New Mailing Address:

1626 RINGLING BOULEVARD
SUITE 510
SARASOTA, FL 34236

FEI Number: 36-4591089 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

COCHRAN, FRED D
9021 TOWN CENTER PARKWAY
BRADENTON, FL 34202 US

Name and Address of New Registered Agent:

COCHRAN, FRED D
1626 RINGLING BOULEVARD
SARASOTA, FL 34236 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: FRED COCHRAN

05/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: COCHRAN, FRED D
Address: 9021 TOWN CENTER PARKWAY
City-St-Zip: BRADENTON, FL 34202

Title: MGR (X) Delete
Name: METNICK, JASON
Address: 1680 FRUITVILLE ROAD
City-St-Zip: SARASOTA, FL 34236

Title: MGR (X) Delete
Name: LANE, JOHN T
Address: 1680 FRUITVILLE ROAD
City-St-Zip: SARASOTA, FL 34236

Title: MGR (X) Delete
Name: MASCIO, GINA
Address: 1680 FRUITVILLE ROAD
City-St-Zip: SARASOTA, FL 34236

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: COCHRAN, FRED D
Address: 1626 RINGLING BOULEVARD
City-St-Zip: SARASOTA, FL 34236

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: FRED COCHRAN

MGR

05/01/2009

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