2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# L06000074083

Entity Name: FL1, LLC

Current Principal Place of Business:

555 GEST STREET
CINCINNATI, OH 45203

New Principal Place of Business:

Current Mailing Address:

555 GEST STREET
CINCINNATI, OH 45203

New Mailing Address:

FEI Number: 83-0464484 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MILLARD, STEVE D
4300 CYPRESS STREET, STE 150
TAMPA, FL 33607 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:	PRES	( ) Delete
Name:	KLUMP, JEFFRY C	
Address:	555 GEST STREET	
City-St-Zip:	CINCINNATI, OH 45203 US	
Title:	VP	( ) Delete
Name:	POSEY, RICHARD C	
Address:	555 GEST STREET	
City-St-Zip:	CINCINNATI, OH 45203 US	
Title:	VP	( ) Delete
Name:	HATFIELD, PAUL L	
Address:	555 GEST STREET	
City-St-Zip:	CINCINNATI, OH 45203 US	
Title:	VP	( ) Delete
Name:	SCHAEFER, JOHN C	
Address:	555 GEST STREET	
City-St-Zip:	CINCINNATI, OH 45203 US	
Title:	VP	( ) Delete
Name:	NOELL, DAVID K	
Address:	555 GEST STREET	
City-St-Zip:	CINCINNATI, OH 45203	

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:	
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: JEFFRY C. KLUMP PRES 01/07/2008

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