

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000083371 1. Entity Name CYNAXIS HOLDINGS, LLC	
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Principal Place of Business 1380 ROYAL PALM SQUARE BLVD FT MYERS, FL 33919 US	Mailing Address P.O. BOX 7143 FT MYERS, FL 33911 US
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DO NOT WRITE IN THIS SPACE

01302008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5432926	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

KYLE, KEVIN A
1380 ROYAL PALM SQUARE BLVD
FT MYERS, FL 33919

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

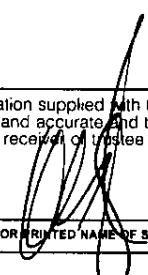
FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KYLE, KEVIN A 1380 ROYAL PALM SQUARE BLVD FT MYERS, FL 33919
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02/23/08-80042-025-138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **2/27/08 234-926-7200**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #