

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089582

FILED  
Jan 04, 2007  
Secretary of State

Entity Name: FLORIDA LEGACY ADVISORS, LLC

## Current Principal Place of Business:

700 S. HARBOUR ISLAND BLVD  
429  
TAMPA, FL 33602 US

## New Principal Place of Business:

## Current Mailing Address:

700 S. HARBOUR ISLAND BLVD  
429  
TAMPA, FL 33602 US

## New Mailing Address:

FEI Number: 20-5532568

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KALOUST, DEREK  
700 S. HARBOUR ISLAND BLVD  
429  
TAMPA, FL 33602 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: MGRM ( ) Delete  
Name: KALOUST, DEREK  
Address: 700 S. HARBOUR ISLAND BLVD 429  
City-St-Zip: TAMPA, FL 33602 US

Title: MGRM ( ) Delete  
Name: ULVENES, MATTHEW  
Address: 5522 AVENUE DU SOLEIL  
City-St-Zip: LUTZ, FL 33558 US

## ADDITIONS/CHANGES:

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 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: DEREK KALOUST

MGMR

01/04/2007

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