

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000103484

1. Entity Name
SYNOVUS CLARK INVESTMENT LLC



FILED
May 03, 2007 8:00 am
Secretary of State

04-16-2007 90346 005 ****50.00

Principal Place of Business
303 9TH STREET WEST
SUITE 201
BRADENTON, FL 34205

Mailing Address
303 9TH STREET WEST
SUITE 201
BRADENTON, FL 34205

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04032007 Chg-LLC CR2E083 (12/06)

4. FEI Number

30-5759970

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SUMMERS, STEVE E
303 9TH STREET WEST
SUITE 201
BRADENTON, FL 34205

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by May 1, 2007

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MGRM
SUMMERS, STEVE E
303 9TH STREET WEST, SUITE 201
BRADENTON, FL 34205

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MGRM
BUSKIRK, FRANK A
303 9TH STREET WEST, SUITE 201
BRADENTON, FL 34205

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MGRM
GRAVELY, JEFFREY D
303 9TH STREET WEST, SUITE 201
BRADENTON, FL 34205

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

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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: