

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000116003

FILED
Mar 18, 2008
Secretary of State

Entity Name: SERVANT INVESTMENTS SARUM FUND (ST. LOUIS), LLC

Current Principal Place of Business:

135 WEST CENTRAL BLVD.
SUITE 1200
ORLANDO, FL 32801

New Principal Place of Business:

1000 LEGION PLACE
SUITE 1650
ORLANDO, FL 32801

Current Mailing Address:

135 WEST CENTRAL BLVD.
SUITE 1200
ORLANDO, FL 32801

New Mailing Address:

1000 LEGION PLACE
SUITE 1650
ORLANDO, FL 32801

FEI Number: 20-8023235

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAY, N. DWAYNE JR., ESQ
GREENSPOON MARDER, P.A.
201 EAST PINE STREET, SUITE 500
ORLANDO, FL 32801 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: MGR () Delete
Name: SERVANT INVESTMENTS., LLC
Address: 135 WEST CENTRAL BLVD., SUITE 1200
City-St-Zip: ORLANDO, FL 32801

Title: MGR () Delete
Name: SARUM ST. LOUIS, LLC,
Address: 255 CALIFORNIA ST., SUITE 400
City-St-Zip: SAN FRANCISCO, CA 94111

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SERVANT INVESTMENTS., LLC
Address: 1000 LEGION PLACE STE 1650
City-St-Zip: ORLANDO, FL 32801

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: ERIN GRAY

VP

03/18/2008

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