

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000119951

FILED
Apr 05, 2008
Secretary of State

Entity Name: FULMER, LEROY, ALBEE, BAUMANN & GLASS, P.L.C.

Current Principal Place of Business:

C/O MICHAEL W. LEROY, ESQ.
910 N. FERNCREEK AVE.
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

C/O MICHAEL W. LEROY, ESQ.
910 N. FERNCREEK AVE.
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 33-1149198

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GASSMAN, ALAN S ESQ.
1245 COURT STREET, SUITE 102
CLEARWATER, FL 33756 US

Name and Address of New Registered Agent:

LEROY, MICHAEL W ESQ.
910 N. FERN CREEK AVENUE
ORLANDO, FL 32803 US

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: MICHAEL W. LEROY

04/05/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FULMER, C. RICHARD JR
Address: 910 N. FERNCREEK AVE
City-St-Zip: ORLANDO, FL 32803

Title: MGRM () Delete
Name: LEROY, MICHAEL W
Address: 910 N. FERNCREEK AVE
City-St-Zip: ORLANDO, FL 32803

Title: MGRM () Delete
Name: BAUMANN, GARY F
Address: 910 N. FERNVREEK AVE
City-St-Zip: ORLANDO, FL 32803

Title: MGRM () Delete
Name: GLASS, MICHAEL L
Address: 910 N. FERNVREEK AVE
City-St-Zip: ORLANDO, FL 32803

Title: MGRM () Delete
Name: ALBEE, SCOTTEL B
Address: 910 N. FERNVREEK AVE
City-St-Zip: ORLANDO, FL 32803

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: MGRM (X) Change () Addition
Name: ALBEE, SCOTT B
Address: 910 N. FERNVREEK AVE
City-St-Zip: ORLANDO, FL 32803

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: MICHAEL W. LEROY

MGRM

04/05/2008

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