

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000015169

FILED
Sep 02, 2008
Secretary of State

Entity Name: ADDISON FITZGERALD MODEL MANAGEMENT, LLC

Current Principal Place of Business:

2085 A1A SOUTH
ST. AUGUSTINE, FL 32080

New Principal Place of Business:

2085 A1A SOUTH
205
ST. AUGUSTINE, FL 32080

Current Mailing Address:

2085 A1A SOUTH
ST. AUGUSTINE, FL 32080

New Mailing Address:

2085 A1A SOUTH
205
ST. AUGUSTINE, FL 32080

FEI Number: 20-8503204 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CURRIE, ALLYSON B ESQ.
1200 PLANTATION ISLAND DRIVE SOUTH
SUITE 140
ST. AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

SAVAGE, MONA K
2085 A1A SOUTH
SUITE 205
ST. AUGUSTINE, FL 32080 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: MONA K. SAVAGE

09/02/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SAVAGE, TISHA
Address: 2085 A1A SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGR () Delete
Name: ADDISON, THOMAS F
Address: 2085 A1A SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGR (X) Delete
Name: SAVAGE, MONA
Address: 2085 A1A SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGR (X) Delete
Name: ADDISON, KATHY
Address: 2085 A1A SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SAVAGE, MONA K
Address: 2085 A1A SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGRM (X) Change () Addition
Name: SAVAGE, TISHA M
Address: 2085 A1A SOUTH
City-St-Zip: ST. AUGUSTINE, FL 32080

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 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: MONA K. SAVAGE

MGR

09/02/2008

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