

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000033158

FILED  
Jul 10, 2008  
Secretary of State

**Entity Name:** LLOYDS ASSET MANAGEMENT, LLC

**Current Principal Place of Business:**

224 DATURA STREET STE 912  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

601 HERITAGE DRIVE  
225  
JUPITER, FL 33458

**Current Mailing Address:**

P.O. BOX 30002  
PALM BEACH GARDENS, FL 33420

**New Mailing Address:**

FEI Number: 20-8728457      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:**

**Name and Address of New Registered Agent:**

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD STE 101  
TALLAHASSEE, FL 323012960 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BURBAGE, JAMES R  
Address: 224 DATURA STREET STE 912  
City-St-Zip: WEST PALM BEACH, FL 33401

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BURBAGE, JAMES R  
Address: 601 HERITAGE DRIVE, SUITE 225  
City-St-Zip: JUPITER, FL 33458

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: JAMES BURBAGE

MGRM

07/10/2008

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