

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000085258

Entity Name: I4 ADVISORS GROUP LLC

FILED  
Jun 04, 2008  
Secretary of State

## Current Principal Place of Business:

9014 ALISTER BLVD E 101  
PALM BEACH GARDENS, FL 33418 US

## New Principal Place of Business:

17 COTTAGE CT  
HUNTINGTON STATION, NY 11746 US

## Current Mailing Address:

4521 PGA BLVD 106  
PALM BEACH GARDENS, FL 33418 US

## New Mailing Address:

2120 EDEN PARKWAY  
LAKELAND, FL 33803 US

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) 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:

TEMPUS GROUP LLC  
4521 PGA BLVD 106  
PALM BEACH GARDEN, FL 33418 US

## Name and Address of New Registered Agent:

TEMPUS GROUP LLC  
2120 EDEN PARKWAY  
LAKELAND, FL 33803 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: TEMPUS GROUP

06/04/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: FATHERS, DOUGLAS G  
Address: 9014 ALISTER BLVD E 101  
City-St-Zip: PALM BEACH GARDENS, FL 33418

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: FATHERS, DOUGLAS G  
Address: PO BOX 20165  
City-St-Zip: HUNTINGTON STATION, NY 11746

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: DOUGLAS FATHERS

MGR

06/04/2008

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