

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000088733

FILED
Apr 15, 2009
Secretary of State

Entity Name: ALPINE ATLANTIC CAPITAL MANAGEMENT, LLC

Current Principal Place of Business:

340 PALMWOOD LN
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

340 PALMWOOD LN
KEY BISCAYNE, FL 33149

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
201 S BISCAYNE BLVD
STE 1600(LAD)
MIAMI, FL 33131 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: MGRM () Delete
Name: BERRY, CHRISTOPHER J
Address: 2909 JUNIPER HILL RD
City-St-Zip: ASPEN, CO 81611

Title: MGRM () Delete
Name: GOMEZ, MARCO A
Address: 340 PALMWOOD LN
City-St-Zip: KEY BISCAYNE, FL 33149

ADDITIONS/CHANGES:

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: MARCO A. GOMEZ MGRM 04/15/2009

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