

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000093224

**FILED**  
**Mar 24, 2009**  
**Secretary of State**

**Entity Name:** ALGEX MANAGEMENT LLC

**Current Principal Place of Business:**

355 BRASSIE DRIVE  
LONGWOOD, FL 32750 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 522142  
LONGWOOD, FL 32752 US

**New Mailing Address:**

P.O. BOX 522142  
LONGWOOD, FL 32752 21

FEI Number: 26-0897706

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROMANACCE, GEORGE L  
355 BRASSIE DRIVE  
LONGWOOD, FL 32750 US

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

ROMANACCE, GEORGE L ESQ.  
355 BRASSIE DRIVE  
LONGWOOD, FL 32750 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: GEORGE L. ROMANACCE, ESQ.

03/24/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ROMANACCE, GEORGE L  
Address: P.O. BOX 522142  
City-St-Zip: LONGWOOD, FL 32752 US

**ADDITIONS/CHANGES:**

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: GEORGE L. ROMANACCE

MGR

03/24/2009

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