

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000107323

FILED
Apr 08, 2008
Secretary of State

Entity Name: TEVMAR FINANCIAL GROUP, LLC

Current Principal Place of Business:

10380 S.W. VILLAGE CENTER DRIVE, SUITE 305
PORT ST. LUCIE, FL 34987

New Principal Place of Business:

Current Mailing Address:

10380 S.W. VILLAGE CENTER DRIVE, SUITE 305
PORT ST. LUCIE, FL 34987

New Mailing Address:

FEI Number: 68-0663145

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLAYTON, HYACINTH M
10380 S.W. VILLAGE CENTER DRIVE, SUITE 305
PORT ST. LUCIE, FL 34987 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: MGR () Delete
Name: CLAYTON, HYACINTH M
Address: 10380 S.W. VILLAGE CENTER DRIVE, SUITE 305
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: CLAYTON, TAMARA
Address: 10380 SW VILLAGE CENTER DRIVE, #305
City-St-Zip: PORT ST. LUCIE, FL 34987

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: HYACINTH CLAYTON

MGR

04/08/2008

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