2008 LIMITED LIABILITY COMPANY

STREET ADDRESS

CITY-ST-ZIP

Sep 02, 2008 8:00 am Secretary of State **ANNUAL REPORT DOCUMENT #L07000110425** 09-02-2008 90077 034 ***138.75 1. Entity Name SEGWARD, LLC Principal Place of Business Mailing Address 2155 ST. JAMES ROAD 50009863 2155 ST. JAMES ROAD GREENEVILLE, TN 37743 115 GREENEVILLE, TN 37743 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07082008 Chg-LLC CR2E083 (12/06) City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LATHEM, JEFFREY J Street Address (P.O. Box Number is Not Acceptable) 1241 AIRPORT ROAD SUITE H DESTIN, FL 32541 AVENUE Zip Code 32456 PORT 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008 In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. 10. ADDITIONS/CHANGES MGRM TITLE ☐ Delete TITLE ☐ Change ☐ Addition SEGERS, JEFFERY T NAME NAME 1064 CORKWOOD DR. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **OVIEDO, FL 32765** CITY-ST-ZIP MGRM TITLE Delete TITLE ☐ Change ☐ Addition NAME WARD, IVAN L MAME 2155 ST. JAMES ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP GREENEVILLE, TN 37743 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE Change ☐ Addition NAME

FILED

G MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

ATTACHMENT

LAW OFFICES OF JEFFERY J. LATHEM, P.A.

326 Reid Avenue Port Saint Joe FL 32456

Jeffery J. Lathem

Attorney & Counselor at Law

Telephone: (850) 229-1212

(850) 674-8877

Facsamile: (850) 229-1214

August 28, 2008

Division of Corporations P.O. Box 6478 Tallahassee, FL 32314

RE: SEGWARD, LLC 2008 Limited Liability Company Annual Report

Dear Madam or Sir:

Please find the enclosed the fully executed Document # L07000110425 for annual filing and Check No.105, in the amount of \$ 138.75, for filing fees due. Additionally, please note the change in address for the Registered Agent.

If there is any outstanding information or any deficiencies in the executed Document # L07000110425, or there are any other requirements that have not been met, please contact me as soon as possible via: (850) 585-8551, as the phone and facsimile numbers above will not be active for two more weeks from today's date.

Thank you in advance for your professional courtesy and immediate attention to this matter.

Sincerely,

Jeffery J. Lathem

enclosures as stated