

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000118113

Entity Name: 1ST ADVANTAGE CAPITAL LLC

FILED
Apr 16, 2009
Secretary of State

Current Principal Place of Business:

15649 INDIAN QUEEN DRIVE
ODESSA, FL 33556

New Principal Place of Business:

1550 WEST CLEVELAND STREET
TAMPA, FL 33606

Current Mailing Address:

638 SAXONY BLVD.
ST. PETERSBURG, FL 33716

New Mailing Address:

FEI Number: 26-1479649

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WETZEL, MARK
638 SAXONY BLVD.
ST PETERSBURG, FL 33716 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: WETZEL, MARK
Address: 15649 INDIAN QUEEN DRIVE
City-St-Zip: ODESSA, FL 33556

Title: MGRM () Delete
Name: CARSON, CHRISTOPHER
Address: 2509 CENTENNIAL FALCON DRIVE
City-St-Zip: VALRICO, FL 33596

Title: MGRM () Delete
Name: WARNOCK, JOHN
Address: 4612 AYRON TERRACE
City-St-Zip: PALM HARBOR, FL 34685

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WETZEL, MARK
Address: 638 SAXONY BLVD.
City-St-Zip: ST. PETERSBURG, FL 33716

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: MARK WETZEL

MGRM

04/16/2009

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