

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000092304

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** THE FITZGERALD COLLABORATIVE, LLC

**Current Principal Place of Business:**

4708 CAPITAL CIRCLE NW  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

445 RIVER VALLEY ROAD  
ATLANTA, GA 30328

**New Mailing Address:**

**FEI Number:** 27-1008734

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GODWIN, ROGER  
3197 MERCHANTS ROW BLVD., STE. 130  
TALLAHASSEE, FL 32311 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  
**Name:** FITZGERALD, DARRELL A  
**Address:** 4708 CAPITAL CIRCLE NW  
**City-St-Zip:** TALLAHASSEE, FL 32303

**Title:** MGRM  
**Name:** GODWIN, ROGER  
**Address:** 4708 CAPITAL CIRCLE NW  
**City-St-Zip:** TALLAHASSEE, FL 32303

**Title:** MGRM  
**Name:** GHAZVINI, BEHAZAD  
**Address:** 4708 CAPITAL CIRCLE NW  
**City-St-Zip:** TALLAHASSEE, FL 32303

I hereby 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:** DARRELL A. FITZGERALD

MGRM

04/29/2011

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