

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000103945

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Entity Name:** SAINT JOUR, HOGAN & CAGLE, PLLC

**Current Principal Place of Business:**

3420 S. DALE MABRY HIGHWAY  
S  
TAMPA, FL 33629 US

**New Principal Place of Business:**

**Current Mailing Address:**

3420 S. DALE MABRY HIGHWAY  
S  
TAMPA, FL 33629 US

**New Mailing Address:**

**FEI Number:** 27-1223056

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAINT JOUR, GREGORY  
3420 S. DALE MABRY HWY  
S  
TAMPA, FL 33629 US

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

CAGLE, CLINTON D  
845 N. GARLAND AVE.  
110  
ORLANDO, FL 32801 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: CLINTON D. CAGLE

02/07/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: HOGAN, REGINA S  
Address: 3420 S. DALE MABRY HWY, SUITE S  
City-St-Zip: TAMPA, FL 33629 US

Title: MGR  
Name: SAINT JOUR, GREGORY  
Address: 3420 S. DALE MABRY HWY, SUITE S  
City-St-Zip: TAMPA, FL 33629 US

Title: MGR  
Name: CAGLE, CLINTON D  
Address: 845 N. GARLAND AVENUE, SUITE 110  
City-St-Zip: ORLANDO, FL 32801

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: CLINTON D. CAGLE

MGR

02/07/2012

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