

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000110292

FILED  
Apr 27, 2010  
Secretary of State

Entity Name: BENCHMARK ALLIANCE LLC

**Current Principal Place of Business:**

28050 US HWY 19 NORTH  
SUITE 400  
CLEARWATER, FL 33761

**New Principal Place of Business:**

**Current Mailing Address:**

28050 US HWY 19 NORTH  
SUITE 400  
CLEARWATER, FL 33761

**New Mailing Address:**

FEI Number: 27-1320191

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DUPONT ALLIANCE LLC  
28050 US HWY 19 NORTH  
SUITE 400  
CLEARWATER, FL 33761 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  
Name: CONDO, JOHN  
Address: 28050 US HWY 19 NORTH, # 400  
City-St-Zip: CLEARWATER, FL 33761 US

Title: MGR  
Name: AVIS, RICHARD DR  
Address: 28050 US HWY 19 NORTH, # 400  
City-St-Zip: CLEARWATER, FL 33761 US

Title: MGR  
Name: GEORGIADIS, ERIC DR  
Address: 28050 US HWY 19 NORTH, # 400  
City-St-Zip: CLEARWATER, FL 33761 US

Title: MGR  
Name: KOUTSOUBOS, IOANNIS  
Address: 28050 US HWY 19 NORTH, # 400  
City-St-Zip: CLEARWATER, FL 33761 US

Title: MGRM  
Name: KOUTSOUBOS, TRENT  
Address: 28050 US HWY 19 NORTH, # 400  
City-St-Zip: CLEARWATER, FL 33761 US

Title: MGRM  
Name: KOUTSOUBOS, JAMES  
Address: 28050 US HWY 19 NORTH, # 400  
City-St-Zip: CLEARWATER, FL 33761 US

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: JOHN CONDO

MGR

04/27/2010

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