

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000312

FILED  
Apr 15, 2008  
Secretary of State

Entity Name: SEMINOLE EXCHANGE, LC

**Current Principal Place of Business:**

5201 RAVENSWOOD RD STE 101  
FORT LAUDERDALE, FL 33312

**New Principal Place of Business:**

5201 RAVENSWOOD RD  
SUITE 101  
FORT LAUDERDALE, FL 33312

**Current Mailing Address:**

5201 RAVENSWOOD RD STE 101  
FORT LAUDERDALE, FL 33312

**New Mailing Address:**

5201 RAVENSWOOD RD  
SUITE 101  
FORT LAUDERDALE, FL 33312

FEI Number: 06-1520111

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEWART, MICHAEL T  
1522 NW 138 TERRACE  
PEMBROKE PINES, FL 33028 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: HOFFMAN, KIM E  
Address: 71 HICKORY HILL CIRCLE  
City-St-Zip: OSTERVILLE, MA 02655

Title: MGRM ( ) Delete  
Name: STEWART, MICHAEL T  
Address: 1522 NW 138 TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: MGRM ( ) Delete  
Name: ANN CYPRESS, MARCIA  
Address: 5201 RAVENSWOOD RD STE 101  
City-St-Zip: FORT LAUDERDALE, FL 33312

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: TAMMY M LONGO

EXEC

04/15/2008

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