

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L98000002805

**FILED**  
**Feb 07, 2011**  
**Secretary of State**

**Entity Name:** ADVANTAGE CAPITAL FL GP I, L.L.C.

**Current Principal Place of Business:**

701 BRICKELL AVENUE  
SUITE 1550  
MIAMI, FL 33131

**New Principal Place of Business:**

174 W. COMSTOCK AVENUE  
SUITE 209  
WINTER PARK, FL 32789

**Current Mailing Address:**

909 POYDRAS STREET  
SUITE 2230  
NEW ORLEANS, LA 70112

**New Mailing Address:**

**FEI Number:** 65-0876503

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GARRETT, TATE  
701 BRICKELL AVENUE  
SUITE 1550  
MIAMI, FL 33130 US

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

GARRETT, TATE  
174 W. COMSTOCK AVENUE  
SUITE 209  
WINTER PARK, FL 32789 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:

02/07/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: JOHNSON, MICHAEL T  
Address: 909 POYDRAS STREET, SUITE 2230  
City-St-Zip: NEW ORLEANS, LA 70112

Title: MGRM  
Name: STULL, STEVEN T  
Address: 909 POYDRAS STREET, SUITE 2230  
City-St-Zip: NEW ORLEANS, LA 70112

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: MICHAEL T. JOHNSON

MGRM

02/07/2011

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