# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Jan 16, 2009**
**Secretary of State**

DOCUMENT# L99000006675

**Entity Name:** C&L VALUE ADVISORS, L.L.C.

**Current Principal Place of Business:**

4805 W. LAUREL STREET, SUITE 100
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

4805 W. LAUREL STREET, SUITE 100
TAMPA, FL 33607

**New Mailing Address:**

**FEI Number: 59-3621814** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

GASSMAN, ALAN S
1245 COURT STREET
STE 100
CLEARWATER, FL 33756 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: CAMERON, KEVIN CPA
Address: 4805 W LAUREL STREET, SUITE 100
City-St-Zip: TAMPA, FL 33607

Title: MGRM ( ) Delete
Name: LOOS, JOLENE T CPA
Address: 4805 W LAUREL STREET, SUITE 100
City-St-Zip: TAMPA, FL 33607

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition
Name: THE CAMERON COMPANY, PA
Address: 4805 W LAUREL STREET, SUITE 100
City-St-Zip: TAMPA, FL 33607

Title: MGRM (X) Change ( ) Addition
Name: J.T. LOOS & ASSOCIAT, ES, PA
Address: 4805 W LAUREL STREET, SUITE 100
City-St-Zip: TAMPA, FL 33607

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: JOLENE T. LOOS MGMR 01/16/2009

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