2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000002158

Entity Name: NOVATION CAPITAL, LLC

FILED May 01, 2008 Secretary of State

Current P	rincipal Place of Business:	New Princ	New Principal Place of Business:		
	JSTRALIAN AVE.				
SUITE 450) LM BEACH, FL 33409				
	·				
Current N	lailing Address:	New Maili	ng Address:		
1818 S. AU SUITE 450	JSTRALIAN AVE.)				
	LM BEACH, FL 33409				
In accordan	: 65-1046683 FEI Number Applied For () ice with s. 607.193(2)(b), F.S., the limited liability	• •	e prior notice.	Certificate of Status Desired() w Registered Agent:	ı
SUITE 4 WESTON	CUTIVE PARK DRIVE , FL 33331 US e named entity submits this statement for the of Florida. RE	e purpose of changing i	ts registered offi	ce or registered agent, or b	oth
SIGNATU	Electronic Signature of Registered	∆aent		 Date	
	g g			Date	
MANAGING	MEMBERS/MANAGERS:	ADDITIONS/	CHANGES:		
Title: Name: Address: City-St-Zip:	MGR () Delete GROSSMAN, HAROLD 1818 S. AUSTRAILIAN AVE 450 WEST PALM BEACH, FL 33409	Title: Name: Address: City-St-Zip:	MGR (X) C SHAPIRO, ROBIN 1818 S. AUSTRA WEST PALM BEA	LIAN AVE 450	
Title: Name: Address: City-St-Zip:	MGR () Delete LOWE, CHARLES 1818 S AUSTRAILIAN AVE 450 WEST PALM BEACH, FL 33409	Title: Name: Address: City-St-Zip:	()(change () Addition	
Title: Name: Address: City-St-Zip:	MGR (X) Delete SHAPIRO, ROBIN 1818 S. AUSTRAILIAN AVE 450 WEST PALM BEACH, FL 33409	Title: Name: Address: City-St-Zip:	() (change () Addition	

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: CHARLES LOWE MGR 05/01/2008