

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000227

FILED
Jan 23, 2008
Secretary of State

Entity Name: ARGENT CAPITAL ADVISORS, LLC

Current Principal Place of Business:

102 W. WHITING STREET
SUITE 600
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

102 W. WHITING STREET
SUITE 600
TAMPA, FL 33602 US

New Mailing Address:

FEI Number: 59-3694100

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOREYRA, ROBERT
102 W. WHITING STREET
SUITE 600
TAMPA, FL 33602 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: P () Delete
Name: MOREYRA, ROBERT
Address: 102 W. WHITING STREET, SUITE 600
City-St-Zip: TAMPA, FL 33602 US

Title: S () Delete
Name: COLLINS, PETER
Address: 102 W. WHITING STREET, SUITE 600
City-St-Zip: TAMPA, FL 33602 US

Title: MGR () Delete
Name: MOREYRA, ROBERT
Address: 102 W. WHITING STREET, SUITE 600
City-St-Zip: TAMPA, FL 33602 US

Title: MGR () Delete
Name: COLLINS, PETER
Address: 102 W. WHITING STREET, SUITE 600
City-St-Zip: TAMPA, FL 33602 US

Title: T () Delete
Name: DOLLARD, GALE
Address: 102 W. WHITING STREET, SUITE 600
City-St-Zip: TAMPA, FL 33602 US

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:

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: ROBERT MOREYRA

P

01/23/2008

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