

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 30, 2008 8:00 am**  
**Secretary of State**

04-30-2008 90025 043 \*\*\*138.75

**DOCUMENT # M02000000961**

1. Entity Name  
ADDISON CAPITAL GROUP, LLC



Principal Place of Business  
318 N. CARSON ST., STE. 208  
CARSON CITY, NV 89701

Mailing Address  
318 N. CARSON ST., STE. 208  
CARSON CITY, NV 89701

50005358



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02272008 Chg-LLC CR2E083 (12/06)

4. FEI Number  
01-0697540

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

## 6. Name and Address of Current Registered Agent

BLOOM, ASHLEY  
1801 CLINT MOORE ROAD #217  
BOCA RATON, FL 33487

## 7. Name and Address of New Registered Agent

Name Bloom, Howard  
Street Address (P.O. Box number is Not Acceptable)  
5301 N. Federal Hwy # 380  
City Boca Raton FL Zip Code 33487

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE H. Bloom

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

03/01/08

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

**Make check payable to**  
**Florida Department of State**

## 9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☐ Delete  
NAME BLOOM, HOWARD  
STREET ADDRESS 1801 CLINT MOORE ROAD #217  
CITY-ST-ZIP BOCA RATON, FL 33487

TITLE MGR ☐ Delete  
NAME TODD, MICHAEL G  
STREET ADDRESS 1801 CLINT MOORE ROAD #217  
CITY-ST-ZIP BOCA RATON, FL 33487

TITLE MGR ☐ Delete  
NAME BLOOM, DIANE  
STREET ADDRESS 1801 CLINT MOORE ROAD #217  
CITY-ST-ZIP BOCA RATON, FL 33487

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 10. ADDITIONS/CHANGES

TITLE MGR ☒ Change ☐ Addition  
NAME BLOOM, HOWARD  
STREET ADDRESS 5301 N. Federal Hwy # 380  
CITY-ST-ZIP Boca Raton, FL-33487

TITLE MGR ☒ Change ☐ Addition  
NAME TODD, MICHAEL G  
STREET ADDRESS 5301 N. Federal Hwy # 380  
CITY-ST-ZIP Boca Raton, FL-33487

TITLE MGR ☒ Change ☐ Addition  
NAME BLOOM, DIANE  
STREET ADDRESS 5301 N. Federal Hwy # 380  
CITY-ST-ZIP Boca Raton, FL-33487

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: H. Bloom  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

03/01/08 (561) 674-0060  
Date Daytime Phone #