

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001558

FILED  
Jan 19, 2009  
Secretary of State

Entity Name: NEWCASTLE CAPITAL MARKETS, LLC

**Current Principal Place of Business:**

8200 - 113TH STREET NORTH  
SUITE 104  
SEMINOLE, FL 33772

**New Principal Place of Business:**

**Current Mailing Address:**

8200 - 113TH STREET NORTH  
SUITE 104  
SEMINOLE, FL 33772

**New Mailing Address:**

FEI Number: 20-0856497      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

DENDAR ENTERPRISES, INC  
8200 - 113TH STREET NORTH  
SUITE 104  
SEMINOLE, FL 33772 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: THOMAS, DENNIS  
Address: 8200 - 113TH STREET NORTH, SUITE 104  
City-St-Zip: SEMINOLE, FL 33772

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: THOMAS, DENNIS  
Address: 8200 - 113TH STREET NORTH, SUITE 104  
City-St-Zip: SEMINOLE, FL 33772

Title: MGRM ( ) Change (X) Addition  
Name: CENTURION CAPITAL HO, LDINGS, LLC  
Address: 8200 - 113TH STREET NORTH, SUITE 104  
City-St-Zip: SEMINOLE, FL 33772

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: DENNIS THOMAS

MGR

01/19/2009

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