

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000006269

FILED
Jul 12, 2007
Secretary of State

Entity Name: PENKER & READ CAPITAL MANAGEMENT, LLC

Current Principal Place of Business:

5777 KELLOGG AVENUE
CINCINNATI, OH 45228

New Principal Place of Business:

Current Mailing Address:

5777 KELLOGG AVENUE
CINCINNATI, OH 45228

New Mailing Address:

FEI Number: 65-1266743 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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: PENKER, JOHN P JR.
Address: 5777 KELLOGG AVENUE
City-St-Zip: CINCINNATI, OH 45228

Title: MGRM () Delete
Name: READ, TREVOR
Address: 5777 KELLOGG AVENUE
City-St-Zip: CINCINNATI, OH 45228

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: READ, TREVOR
Address: 5777 KELLOGG AVENUE
City-St-Zip: CINCINNATI, OH 45228

Title: MGR (X) Change () Addition
Name: READ, TRACY
Address: 5777 KELLOGG AVENUE
City-St-Zip: CINCINNATI, OH 45228

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: TREVOR READ

MGRM

07/12/2007

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