2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 10, 2009
Secretary of State

DOCUMENT# M07000004159

Entity Name: NOBLE STRATEGY, LLC

Current Principal Place of Business:

201 S. BISCAYNE DR.
28TH FLR.
MIAMI, FL 33131

New Principal Place of Business:

1800 PEMBROOK DRIVE
STE 300
ORLANDO, FL 32810

Current Mailing Address:

201 S. BISCAYNE DR.
28TH FLR.
MIAMI, FL 33131

New Mailing Address:

1800 PEMBROOK DRIVE
STE 300
ORLANDO, FL 32810

FEI Number: 42-1548092 **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:

PARRISH, WILLIAM S JR.
201 S. BISCAYNE DR.
28TH FLR.
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

PARRISH, WILLIAM S JR.
1800 PEMBROOK DRIVE
STE 300
ORLANDO, FL 32810 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: WILLIAM S. PARRISH, JR. 08/10/2009
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: CEOP ( ) Delete
Name: PARRISH, WILLIAM S JR
Address: 201 S BISCAYNE BLVD FL 28
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: CEOP (X) Change ( ) Addition
Name: PARRISH, WILLIAM S JR
Address: 1800 PEMBROOK DRIVE STE. 300
City-St-Zip: ORLANDO, FL 32810

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: WILLIAM S. PARRISH, JR. CEOP 08/10/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date