

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000012869

FILED
Mar 17, 2008
Secretary of State

Entity Name: MAINSAIL MANAGEMENT SPE GP, INC.

Current Principal Place of Business:

5108 EISENHOWER BLVD.
TAMPA, FL 33634

New Principal Place of Business:

Current Mailing Address:

5108 EISENHOWER BLVD.
TAMPA, FL 33634

New Mailing Address:

FEI Number: 59-3216763

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLIER, JOE C
5108 EISENHOWER BLVD.
TAMPA, FL 33634 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: COLLIER, JOE C
Address: 5108 EISENHOWER BLVD.
City-St-Zip: TAMPA, FL 33634

Title: D () Delete
Name: POLLACK, MARC
Address: 5605 GLENRIDGE DR SUITE 775
City-St-Zip: ATLANTA, GA 30327

Title: D () Delete
Name: DUVA, VICTOR A
Address: C/O 1209 ORANGE STREET
City-St-Zip: WILMINGTON, DE 19801

Title: D () Delete
Name: DENNY, CAMILIA M
Address: C/O 1209 ORANGE STREET
City-St-Zip: WILMINGTON, DE 19801

Title: D () Delete
Name: CORLEW, JULIANNE V
Address: 8010 WOODLAND CENTER BLVD SUITE 900
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: D (X) Change () Addition
Name: CORLEW, JULIANNE V
Address: 5108 EISENHOWER BLVD
City-St-Zip: TAMPA, FL 33634

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE C COLLIER III

D

03/17/2008

Electronic Signature of Signing Officer or Director

Date