

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000107779

**FILED**  
**Apr 02, 2011**  
**Secretary of State**

**Entity Name:** LAY, NORMAN, MCCONNELL AND URSITTI, LLC

**Current Principal Place of Business:**

1223 WHITE STREET  
KEY WEST, FL 33040

**New Principal Place of Business:**

1223 WHITE STREET  
101  
KEY WEST, FL 33040

**Current Mailing Address:**

1223 WHITE STREET  
KEY WEST, FL 33040

**New Mailing Address:**

1223 WHITE STREET  
101  
KEY WEST, FL 33040

FEI Number: 27-1282472

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAY, WILLIAM  
1223 WHITE STREET  
KEY WEST, FL 33040 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  
Name: LAY, WILLIAM  
Address: 1223 WHITE STREET  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM  
Name: NORMAN, NICK  
Address: 1420 VON PHISTER STREET  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM  
Name: MCCONNELL, MICHAEL S  
Address: 10511 BARNSTABLE CT.  
City-St-Zip: SPRING, TX 77379

Title: MGRM  
Name: URSITTI, DOMINIC A  
Address: 617 MICKENS LANE  
City-St-Zip: KEY WEST, FL 33040

I hereby 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: DOMINIC A URSITTI

MGRM

04/02/2011

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