

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000064143

**Entity Name:** PELSON & ASSOCIATES, LLC

**Current Principal Place of Business:**

9400 RIVER CROSSING BOULEVARD  
104  
NEW PORT RICHEY, FL 34655

**Current Mailing Address:**

P.O. BOX 2108  
ELFERS, FL 34680 US

**FEI Number:** 26-2900673

**Certificate of Status Desired:** No

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

HUDSON, JOHN JR  
9400 RIVER CROSSING BOULEVARD  
NEW PORT RICHEY, FL 34655 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

**Authorized Person(s) Detail :**

|                 |                 |                 |                               |
|-----------------|-----------------|-----------------|-------------------------------|
| Title           | MGRM            | Title           | MGRM                          |
| Name            | LJH, INC.       | Name            | PELOSI, ANDREW                |
| Address         | P.O. BOX 2108   | Address         | 9400 RIVER CROSSING BOULEVARD |
| City-State-Zip: | ELFERS FL 34680 | City-State-Zip: | NEW PORT RICHEY FL 34655      |

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ANDREW PELOSI

MGRM

03/20/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date