

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000001540

**Entity Name:** SERTEN ADVISORS, LLC

**Current Principal Place of Business:**

1765 GREENSBORO STATION PLACE  
SUITE 450  
TYSONS CORNER, VA 22102

**Current Mailing Address:**

1765 GREENSBORO STATION PLACE  
SUITE 450  
TYSONS CORNER, VA 22102 US

**FEI Number:** 45-4083097

**Certificate of Status Desired:** No

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

LUSSIER, JAMES R  
225 EAST ROBINSON STREET, SUITE 600  
ORLAND, FL 32801 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            MPRI  
Name            HUBBERMAN, STEVEN D  
Address        1765 GREENSBORO STATION PLACE  
                  SUITE 450  
City-State-Zip: TYSONS CORNER VA 22102

Title            MGRM  
Name            SCHWEITZER, PAUL S  
Address        37 NORTH ORANGE AVENUE, SUITE  
                  500  
City-State-Zip: ORLANDO FL 32801

Title            D  
Name            LESIUK, KATHY G  
Address        37 NORTH ORANGE AVENUE, SUITE  
                  500  
City-State-Zip: ORLANDO FL 32801

*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:** STEVEN HUBBERMAN

**MANAGING PRINCIPAL**

**03/13/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date