

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 06, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000002774

1. Entity Name
STERLING MARBLE & GRANITE, LLC



Principal Place of Business
1951 HAMMONDSVILLE ROAD #4
POMPANO BEACH, FL 33069

Mailing Address
P.O. BOX 678
VESTAL, NY 13851-0678



06302005 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
06-1609493

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARTHUR C. KOSKI, P.A.
568 YAMATO ROAD #200
BOCA RATON, FL 33431

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$50.00
Due by September 7, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
LEDBETTER, KIRK D
2572 SE 13TH CT.
POMPANO BEACH, FL 33062

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
NEWMAN, BARRY G
3222 CYNTHIA DR.
BINGHAMTON, NY 13903

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
NEWMAN, MARC
2020 E. HAMTON RD.
BINGHAMTON, NY 13903

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
NEWMAN, DAVID
110 BROCHANT CIR.
BLUE BELL, PA 19422

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

1100000371044
07/06/05-80008-011 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

Signature
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #