

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000006289

Entity Name: NCS & ASSOCIATES, L.L.C.

**FILED**  
**Apr 28, 2008**  
**Secretary of State**

**Current Principal Place of Business:**

6742 FOREST HILL BLVD., #143  
WEST PALM BEACH, FL 33413

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 19803  
WEST PALM BEACH, FL 33416

**New Mailing Address:**

FEI Number: 56-9015991

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PLOTKA, EVAN B P.L.  
7771 W. OAKLAND PARK BLVD.  
SUITE 140  
SUNRISE, FL 33351 US

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

PLOTKA, EVAN B P.L.  
210 N. UNIVERSITY DR.  
SUITE 301  
CORAL SPRINGS, FL 33071 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:

04/28/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: GELSOMINO, J. TERRY  
Address: PO BOX 19803  
City-St-Zip: WPB, FL 33146

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 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: J. TERRY GELSOMINO

MGR.

04/28/2008

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