


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 17, 2008 8:00 am
Secretary of State

04-17-2008 90162 032 ***138.75

DOCUMENT # L01000017725 1. Entity Name DENNIS MARTINO & ASSOCIATES, LLC	
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Principal Place of Business 3165 MCMULLEN BOOTH ROAD D-1 CLEARWATER, FL 33761	Mailing Address 3165 MCMULLEN BOOTH ROAD D-1 CLEARWATER, FL 33761
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DO NOT WRITE IN THIS SPACE

01032008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 59-3752308	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

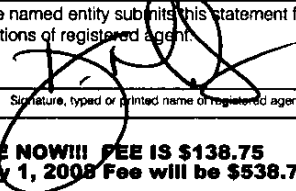
6. Name and Address of Current Registered Agent

**MARTINO, DENNIS
3165 MCMULLEN BOOTH RD
D-1
CLEARWATER, FL 33761**

*2531 LANDMARK DR
STE 201*

**DO NOT WRITE
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  *DENNIS MARTINO* DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

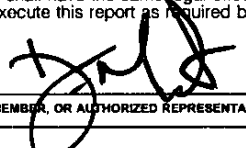
**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MARTINO, DENNIS 3165 MCMULLEN BOOTH RD, D-1 CLEARWATER, FL 33761
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<i>2531 LANDMARK DR STE 201</i>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *DENNIS MARTINO*  *3/2/08 727-734-6101*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #