

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 16, 2007 8:00 am
Secretary of State

01-19-2007 90061 005 ****55.00

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1. Entity Name

LISA ERDMANN & ASSOCIATES, LLC



Principal Place of Business

777 S FLAGLER DR STE 116
WEST PALM BEACH, FL 33401

Mailing Address

777 S FLAGLER DR STE 116
WEST PALM BEACH, FL 33401

DO NOT WRITE IN THIS SPACE

01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number

81-0582179

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ERDMANN, ELIZABETH
777 SOUTH FLAGLER DR., STE. 116
WEST PALM BEACH, FL 33401

**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 _____

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

(NOTE: Registered Agent signature required when re-registering)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	ERDMANN, ELIZABETH
STREET ADDRESS	275 BARCELONA RD
CITY-ST-ZIP	WEST PALM BEACH, FL 33401

TITLE	
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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: _____

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

Date

Daytime Phone #

2/12/07