

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003343

FILED  
Feb 02, 2010  
Secretary of State

Entity Name: THE GENTILE GROUP, LLC

**Current Principal Place of Business:**

28059 U.S. HWY. 19 NO.  
#302  
CLEARWATER, FL 33761 US

**New Principal Place of Business:**

**Current Mailing Address:**

28059 U.S. HWY. 19 NO.  
#302  
CLEARWATER, FL 33761 US

**New Mailing Address:**

FEI Number: 65-1194170

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GENTILE, MICHAEL L  
28059 U.S. HWY 19 NO.  
#302  
CLEARWATER, FL 33761 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: CHRM  
Name: GENTILE, MICHAEL L  
Address: 28059 U.S. HWY. 19 NO. STE. 302  
City-St-Zip: CLEARWATER, FL 33761

Title: PRES  
Name: GENTILE, MICHAEL B  
Address: 28059 U.S. HWY. 19 NO. STE. 302  
City-St-Zip: CLEARWATER, FL 33761

Title: TREA  
Name: GUARDIAN, JENNIFER H  
Address: 28059 U.S. HWY 19 N. STE. 302  
City-St-Zip: CLEARWATER, FL 33761

Title: MEMB  
Name: ITALIANO, SALVITORE  
Address: 28059 U.S. HWY 19 NO. STE. 302  
City-St-Zip: CLEARWATER, FL 33761

I hereby 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: MICHAEL L. GENTILE

CHRM

02/02/2010

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