


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 21, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # L03000004446

1. Entity Name  
 CEFERIN & VERICKER LLC



Principal Place of Business  
 5950 BAHAMA WAY N  
 ST. PETE BEACH, FL 33706

Mailing Address  
 P.O. BOX 66570  
 SAINT PETERSBURG BEACH, FL 33736 US

**DO NOT WRITE IN THIS SPACE**



03182008No Chg-LLC CR2E083 (12/07)

4. FEI Number 59-2987168	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

VERICKER, CHERYL L  
 5950 BAHAMA WAY N  
 ST. PETE BEACH, FL 33706

**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 \_\_\_\_\_ 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	MGRM VERICKER, CHERYL L 5950 BAHAMA WAY N SAINT PETERSBURG BEACH, FL 33706
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CEFERIN, JEANNINE 42 W. 471 REDBUD CT. SAINT CHARLES, IL 60175
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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 04/08/08-80040-007 138.75

**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: *Cheryl L. Vericker* 3/18/08 (727) 360-5460

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