

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000010324

**FILED**  
**Jan 06, 2005**  
**Secretary of State**

**Entity Name:** RON TREMBLAY ASSOCIATES LLC

**Current Principal Place of Business:**

1005 BROOKS LANE  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

930 S. LAKESIDE DR.  
LAKE WORTH, FL 33460

**Current Mailing Address:**

1005 BROOKS LANE  
DELRAY BEACH, FL 33483

**New Mailing Address:**

930 S. LAKESIDE DR.  
LAKE WORTH, FL 33460

**FEI Number:** 76-0727856

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PRESLEY, MICHAEL R  
701 NORTHPOINT PKWY., STE. 220  
WEST PALM BEACH, FL 33407 US

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

TREMBLAY, RON M  
930 S. LAKESIDE DR.  
LAKE WORTH, FL 33460 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: RON TREMBLAY

01/06/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: TREMBLAY, RON M MR.  
Address: C/O 930 S. LAKESIDE DRIVE  
City-St-Zip: LAKE WORTH, FL 33460 US

**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 for the exemption stated in Section 119.07(3)(i), 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: RON TREMBLAY

MGR

01/06/2005

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