

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032815

FILED
Apr 30, 2004
Secretary of State

Entity Name: PAOLI AND ASSOCIATES LLC

Current Principal Place of Business:

1240 S. NORCOOSSEE RD
ST. CLOUD, FL 34772

New Principal Place of Business:

1240 S. NORCOOSSEE RD
ST. CLOUD, FL 34771

Current Mailing Address:

1240 S. NORCOOSSEE RD
ST. CLOUD, FL 34772

New Mailing Address:

1240 S. NORCOOSSEE RD
ST. CLOUD, FL 34771

FEI Number: 11-3704813

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAOLI, CHRISTOPHER J
1240 S. NORCOOSSEE RD
ST. CLOUD, FL 34772

Name and Address of New Registered Agent:

PAOLI, CHRISTOPHER J
1240 S. NORCOOSSEE RD
ST. CLOUD, FL 34771

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: CHRISTOPHER J. PAOLI

04/30/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: FOWLER-PAOLI, JULIE
Address: 1240 S. NORCOOSSEE RD
City-St-Zip: ST. CLOUD, FL 34772

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FOWLER-PAOLI, JULIE
Address: 1240 S. NORCOOSSEE RD
City-St-Zip: ST. CLOUD, FL 34771

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: JULIE FOWLER-PAOLI

MGR

04/30/2004

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