

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040384

Entity Name: ALERTI, LLC

FILED  
Mar 14, 2005  
Secretary of State

**Current Principal Place of Business:**

10591 U.S. 301  
HAMPTON, FL 32044

**New Principal Place of Business:**

**Current Mailing Address:**

10591 U.S. 301  
HAMPTON, FL 32044

**New Mailing Address:**

FEI Number: 86-1112289

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NEWELL, PAUL D  
260A LAWRENCE BLVD.  
STE. 201  
KEYSTONE HEIGHTS, FL 32044 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: ROSE, EDWARD B  
Address: PO BOX 405  
City-St-Zip: HARRISVILLE, RI 02830

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Change (X) Addition  
Name: ROSE, EDWARD B  
Address: PO 405  
City-St-Zip: HARRISVILLE, RI 02830

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: EDWARD ROSE

MGMR

03/14/2005

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