

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000040384

Entity Name: ALERTI, LLC

**FILED**  
**Apr 13, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

10591 U.S. 301  
HAMPTON, FL 32044

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 405  
HARRISVILLE, RI 02830

**New Mailing Address:**

P.O. BOX 156  
HAMPTON, FL 32044

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/MANAGERS:**

Title: MGRM  
Name: ROSE, EDWARD B  
Address: 624 SHERMAN FARM RD  
City-St-Zip: HARRISVILLE, RI 02830

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: ED ROSE

MAN

04/13/2010

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