

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 11, 2005 8:00 am
Secretary of State

03-11-2005 90057 034 ****50.00

DOCUMENT # L03000046120

1. Entity Name
ATTORNEY TO ATTORNEY, LLC



Principal Place of Business 1005 PINE LAKE CIRCLE PALM BEACH GARDENS, FL 33418 US	Mailing Address 1005 PINE LAKE CIRCLE PALM BEACH GARDENS, FL 33418 US
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DO NOT WRITE IN THIS SPACE



03062005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 45-0529048	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**VICKEY, GERARD M
 1005 PINE LAKE CIRCLE
 PALM BEACH GARDENS, FL 33418**

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VICKEY, GERARD M 1005 PINE LAKE CIRCLE PALM BEACH GARDENS, FL 33410 33418
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Gerard M. Vickey **GERARD M. Vickey**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date **3-9-05** Daytime Phone #

561-622-0246