

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**

**Apr 27, 2006 08:00 AM  
Secretary of State**

**DOCUMENT # L04000002567**

1. Entity Name

PEO SOLUTION ADVISORS LLC



Principal Place of Business

8509 TOURMALINE BLVD.  
BOYNTON BEACH, FL 33437

Mailing Address

8509 TOURMALINE BLVD.  
BOYNTON BEACH, FL 33437



04232006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

45-0534912

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BURGER, MARK J  
8509 TOURMALINE BLVD.  
BOYNTON BEACH, FL 33437

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM  
NAME BURGER, MARK J  
STREET ADDRESS 8509 TOURMALINE BLVD.  
CITY-ST-ZIP BOYNTON BEACH, FL 33437

TITLE MGR  
NAME TAYLOR, AARON K  
STREET ADDRESS 20804 BOCA RIDGE DRIVE NORTH  
CITY-ST-ZIP BOCA RATON, FL 33428

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05/09/06-80122-001 50.00

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** *Mark J Burger*

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

Date

Daytime Phone #

*4-24-2006 561-889-350*