

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000014345

**FILED**  
**Apr 29, 2005**  
**Secretary of State**

**Entity Name:** ALBERTELLI & ASSOCIATES, P.L.

**Current Principal Place of Business:**

330 A1A NORTH, SUITE 324  
PONTE VEDRA BEACH, FL 32082

**New Principal Place of Business:**

**Current Mailing Address:**

330 A1A NORTH, SUITE 324  
PONTE VEDRA BEACH, FL 32082

**New Mailing Address:**

**FEI Number:** 68-0581294

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALBERTELLI, JAMES E ESQ  
330 A1A NORTH, SUITE 324  
PONTE VEDRA BEACH, FL 32082 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:** MGR ( ) Delete  
**Name:** ALBERTELLI, JAMES E ESQ  
**Address:** 330 A1A NORTH, SUITE 324  
**City-St-Zip:** PONTE VEDRA BEACH, FL 32082

**ADDITIONS/CHANGES:**

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

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:** JAMES E. ALBERTELLI

MGR

04/29/2005

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