## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000016813

WADE, SEAN

3131 HOMESTEAD RD #6L

SANTA CLARA, CA 95051

Name:

Address:

City-St-Zip:

Entity Name: SYDNEY AND ASSOCIATES, LLC

FILED May 20, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 9444 OLYMPIA FIELDS DR SAN RAMON, CA 94583 **Current Mailing Address: New Mailing Address:** 9444 OLYMPIA FIELDS DR SAN RAMON, CA 94583 FEI Number: 20-0800509 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: VOGT, MARC D 1270 NORTH EGLIN PARKWAY STE # A15 SHALIMAR, FL 32579 US 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete WADE, JUDITH Name: Name: 10528 PATRINGTON CT Address: Address: City-St-Zip: LAS VEGAS, NV 89123 City-St-Zip: Title: MGRM Title: ( ) Delete () Change () Addition Name: BRACK, CHRIS Name: Address: 9444 OLYMPIA FIELDS DR Address: City-St-Zip: LAS VEGAS, NV 89123 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BRACK, JEREMY Name: Name: 9444 OLYPMPIA FIELDS DR Address: Address: City-St-Zip: SAN RAMON, CA 94583 City-St-Zip: ( ) Delete (X) Change ( ) Addition Title: MGRM Title: MGRM

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Name:

Address:

City-St-Zip:

WADE, SEAN

571 W. RINCON AVE

CAMPBELL, CA 95008

SIGNATURE: JEREMY BRACK MGRM 05/20/2007