



2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2005 8:00 am
Secretary of State

04-12-2005 90019 041 ****55.00

DOCUMENT # L04000025712																														
1. Entity Name FALCONE & COMPANY, LLC																														
Principal Place of Business 220 DAVIS BLVD. SARASOTA, FL 34237			Mailing Address 220 DAVIS BLVD. SARASOTA, FL 34237																											
2. Principal Place of Business 220 Davis Blvd Suite, Apt. #, etc.		3. Mailing Address 220 Davis Blvd Suite, Apt. #, etc.																												
City & State SARASOTA FL		City & State SARASOTA FL		4. FEI Number 20-1028564																										
Zip 34237		Country USA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required																										
6. Name and Address of Current Registered Agent CASWELL, CHRIS 2364 FRUITVILLE ROAD SARASOTA, FL 34237				7. Name and Address of New Registered Agent Name: <u>Anthony Falcone</u> Street Address (P.O. Box Number is Not Acceptable): <u>220 DAVIS BLVD</u> City: <u>SARASOTA</u> <u>FL</u> <u>34237</u>																										
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: <u>[Signature]</u> 8² April '05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>																														
Filing Fee is \$50.00 Due by May 1, 2005			Make check payable to Florida Department of State																											
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES																											
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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: <u>[Signature]</u> 8² April '05 941-780-3556 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>																														