## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000037581

Entity Name: MICELI & VICARIO LLC

Address:

City-St-Zip:

232 W. LAKE BLVD

MAHOPAC, NY 10541

FILED Mar 07, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4886 CHERRY LAUREL DRIVE 4886 CHERRY LAUREL CIRCLE SARASOTA, FL 34241 SARASOTA, FL 34241 **Current Mailing Address: New Mailing Address:** 4886 CHERRY LAUREL DRIVE 4886 CHERRY LAUREL CIRCLE SARASOTA, FL 34241 SARASOTA, FL 34241 FEI Number: 20-1137671 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MICELI, JOHN MICELI, JOHN 4886 CHERRY LAUREL DRIVE 4886 CHERRY LAUREL CIRCLE SARASOTA, FL 34241 SARASOTA, FL 34241 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: 03/07/2005 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: Title: () Change () Addition () Delete MICELI, JOHN Name: Name: Address: 4886 CHERRY LAUREL DRIVE Address: SARASOTA, FL 34241 City-St-Zip: City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: MICELI, KERRY Name: Address: 4886 CHERRY LAUREL DRIVE Address: City-St-Zip: SARASOTA, FL 34241 City-St-Zip: Title: MGR () Delete Title: () Change () Addition VICARIO, ANN MARIA Name: Name: 232 W. LAKE BLVD Address: Address: City-St-Zip: MAHOPAC, NY 10541 City-St-Zip: Title: MGR ( ) Delete Title: () Change () Addition Name: VICARIO, MICHAEL Name:

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.

Address:

City-St-Zip:

SIGNATURE: JOHN MICELI MGR 03/07/2005