## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000038385

City-St-Zip: BONITA SPRINGS, FL 34135

Entity Name: LAZAR & HUTCHINSON ASSOCIATES, LLC

FILED Jan 19, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	CROIX WAY OOD, FL 3422	3		
Current Mailing Address:			New Mailing Address:	
	CROIX WAY OOD, FL 3422	3		
FEI Number	: 41-2137729	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
The above	OOD, FL 3422		purpose of changing its register	ed office or registered agent, or both
SIGNATUI	RE:			
Electronic Signature of Registered Age			ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR ( HUTCHINSON, 26 SAINT CRO ENGLEWOOD,	X WAY	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM ( HUTCHINSON, 26 SAINT CRO ENGLEWOOD,	IX WAY	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	MGRM ( LAZAR, JAY R 28505 F.B. FO BONITA SPRIN		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	MGRM ( ) LAZAR, KAREN 28505 F.B. FO		Title: Name: Address:	( ) Change ( ) Addition

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.

City-St-Zip:

SIGNATURE: ROSEMARY K. HUTCHINSON MGMR 01/19/2009