2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 03, 2007
Secretary of State

DOCUMENT# L04000053414

Entity Name: SIPRO ASSOCIATES L.L.C.

Current Principal Place of Business:

P.O. BOX 1623
INVERNESS, FL 34451

New Principal Place of Business:

6233 E LYNN ST
INVERNESS, FL 34452

Current Mailing Address:

P.O. BOX 1623
INVERNESS, FL 34451

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

SPALLANE, MICHAEL
6223 E LYNN STREET
INVERNESS, FL 34452 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/MANAGERS:

Title: CEO ( ) Delete
Name: SPALLANE, MICHAEL
Address: PO BOX 1623
City-St-Zip: INVERNESS, FL 34451

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 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.

SIGNATURE: MICHAEL SPALLANE CEO 05/03/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date