

# **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000055100

**FILED**  
**Aug 28, 2008**  
**Secretary of State**

**Entity Name:** LAW OFFICES OF JEROME A. SICO, LLC

**Current Principal Place of Business:**

12670 NEW BRITTANY BLVD, 203  
FORT MYERS, FL 33907 US

**New Principal Place of Business:**

2104 W. 1ST. ST. #2402  
FORT MYERS, FL 33901 US

**Current Mailing Address:**

PO BOX 480  
FT. MYERS, FL 339020480

**New Mailing Address:**

**FEI Number:** 20-1406531      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SICO, JEROME A ESQ  
12670 NEW BRITTANY BLVD, 203  
FORT MYERS, FL 33907 US

**Name and Address of New Registered Agent:**

SICO, JEROME A ESQ  
2104 W. 1ST. ST. #2402  
FORT MYERS, FL 33901 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:

08/28/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SICO, JEROME A  
Address: PO BOX 480  
City-St-Zip: FORT MYERS, FL 339020480 US

**ADDITIONS/CHANGES:**

Title: MM (X) Change ( ) Addition  
Name: SICO, JEROME A ESQ.  
Address: PO BOX 480  
City-St-Zip: FORT MYERS, FL 339020480 US

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: JEROME A. SICO, ESQ.

MM

08/28/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date