

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000076162

Entity Name: FUCCILLO TESORO, LLC

FILED  
Feb 09, 2006  
Secretary of State

**Current Principal Place of Business:**

76 DREW DRIVE  
EASTPORT, NY 11941

**New Principal Place of Business:**

**Current Mailing Address:**

76 DREW DRIVE  
EASTPORT, NY 11941

**New Mailing Address:**

FEI Number: 20-1774941

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DAVIS, RICHARD T  
901 N. OLIVE AVENUE  
WEST PALM BEACH, FL 33401 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: MGRM ( ) Delete  
Name: FUCCILLO, RALPH  
Address: 76 DREW DRIVE  
City-St-Zip: EASTPORT, NY 11941 US

Title: MGRM ( ) Delete  
Name: KEW FOREST LIQUIDATI, NG TRUST  
Address: 67 NORTH PINE LAKE DRIVE  
City-St-Zip: PATCHOGUE, NY 11772 US

Title: MGRM ( ) Delete  
Name: FUCCILLO, ARTHUR  
Address: 14709 CHESTERFIELD ROAD  
City-St-Zip: ROCKVILLE, MD 20853 US

Title: MGRM ( ) Delete  
Name: FUCCILLO, DRUCILLA  
Address: 14709 CHESTERFIELD ROAD  
City-St-Zip: ROCKVILLE, MD 20853 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: RALPH FUCCILLO

MGRM

02/09/2006

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