

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025304

**FILED**  
**Mar 20, 2009**  
**Secretary of State**

**Entity Name:** COMPLIANCE ASSOCIATES, LLC

**Current Principal Place of Business:**

6663 GIRALDA CIR.  
BOCA RATON, FL 33433

**New Principal Place of Business:**

23123 STATE ROAD 7 - SUITE 236  
BOCA RATON, FL 33428

**Current Mailing Address:**

6663 GIRALDA CIR.  
BOCA RATON, FL 33433

**New Mailing Address:**

**FEI Number:** 20-2527500      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

TELIAS, CARL S  
6663 GIRALDA CIR.  
BOCA RATON, FL 33433      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:** TELIAS, CARL S  
**Address:** 6663 GIRALDA CIR.  
**City-St-Zip:** BOCA RATON, FL 33433

**ADDITIONS/CHANGES:**

**Title:** MGRM      (X) Change ( ) Addition  
**Name:** TELIAS, CARL S  
**Address:** 23123 STATE ROAD 7 - SUITE 236  
**City-St-Zip:** BOCA RATON, FL 33428

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:** CARL S. TELIAS

DIR

03/20/2009

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