

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000029752

**FILED**  
**Apr 01, 2011**  
**Secretary of State**

**Entity Name:** S&T FLORIDA ASSOCIATES, L.L.C.

**Current Principal Place of Business:**

55 PROSPECT PLACE  
HILLSDALE, NJ 07642

**New Principal Place of Business:**

**Current Mailing Address:**

55 PROSPECT PLACE  
HILLSDALE, NJ 07642

**New Mailing Address:**

**FEI Number:** 05-0621395

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLORIDA INCORPORATORS, INC.  
8875 HIDDEN RIVER PKWY STE. 300  
TAMPA, FL 33637 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  
**Name:** RAYMOND, SCOTT  
**Address:** 8 COTTAGE PLACE  
**City-St-Zip:** HILLSDALE, NJ 07642

**Title:** MGRM  
**Name:** RAYMOND, TODD W  
**Address:** 87 DEER TRAIL  
**City-St-Zip:** HILLSDALE, NJ 07642

I hereby 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:** SCOTT RAYMOND

MGRM

04/01/2011

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