

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000052016

**FILED**  
**Apr 10, 2010**  
**Secretary of State**

**Entity Name:** ANDREWS, SMITH, & ASSOCIATES, LLC

**Current Principal Place of Business:**

238 MONET DRIVE  
NOKOMIS, FL 34275

**New Principal Place of Business:**

**Current Mailing Address:**

238 MONET DRIVE  
NOKOMIS, FL 34275

**New Mailing Address:**

**FEI Number:** 20-3005720

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MORETTI, LYDIA M  
238 MONET DRIVE  
NOKOMIS, FL 34275 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: MORETTI, LYDIA M  
Address: 238 MONET DR.  
City-St-Zip: NOKOMIS, FL 34275

Title: MGRM  
Name: MORETTI, JAMES A  
Address: 4017 CROCKERS LAKE BLVD #1411  
City-St-Zip: SARASOTA, FL 34238

Title: MGRM  
Name: MORETTI, MICHAEL A  
Address: 238 MONET DRIVE  
City-St-Zip: NOKOMIS, FL 34275

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: LYDIA M. MORETTI

MGRM

04/10/2010

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