

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000092021

FILED  
Mar 13, 2007  
Secretary of State

Entity Name: ALBERTELLI & HALSEMA, P.L.

**Current Principal Place of Business:**

208 NORTH LAURA STREET, STE. 900  
JACKSONVILLE, FL 32202 US

**New Principal Place of Business:**

**Current Mailing Address:**

208 NORTH LAURA STREET, STE. 900  
JACKSONVILLE, FL 32202 US

**New Mailing Address:**

FEI Number: 32-0161913

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALBERTELLI, JAMES E ESQ.  
5200 BELFORT RD.  
SUITE 250  
JACKSONVILLE, FL 32256 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: MGR ( ) Delete  
Name: ALBERTELLI, JAMES E  
Address: 5200 BELFORT ROAD, STE. 250  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: MGR ( ) Delete  
Name: HALSEMA, JAY C  
Address: 1506 PRUDENTIAL DRIVE  
City-St-Zip: JACKSONVILLE, FL 32207 US

**ADDITIONS/CHANGES:**

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: JAMES E. ALBERTELLI

MGR

03/13/2007

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