

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90235 030 ***138.75

DOCUMENT # L05000104975

1. Entity Name
1110 STONEYBROOK LLC



Principal Place of Business

~~42 AUTUMN WOOD~~
~~ROCHESTER, NY 14624~~
22 BRISTOL VIEW DR.
FAIRPORT, NY 14450

Mailing Address

22 BRISTOL VIEW DR
FAIRPORT, NY 14450

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02272008 Chg-LLC CR2E083 (12/06)

4. FEI Number
20-3694671

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

INCORPORATING SERVICES, LTD.
1540 GLENWAY DRIVE
TALLAHASSEE, FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE MGR ☐ Delete
NAME DESIDERIO, NICHOLAS
STREET ADDRESS ~~42 AUTUMN WOOD~~ **22 BRISTOL VIEW DR.**
CITY-ST-ZIP ~~ROCHESTER, NY 14624~~ **FAIRPORT, N.Y. 14450**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS →
CITY-ST-ZIP →

TITLE MGRM ☐ Delete
NAME DESIDERIO, CATHY
STREET ADDRESS ~~12 AUTUMN WOOD~~ **22 BRISTOL VIEW DR.**
CITY-ST-ZIP ~~ROCHESTER, NY 14624~~ **FAIRPORT, NY 14450**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS →
CITY-ST-ZIP →

TITLE MGRM ☐ Delete
NAME DESIDERIO, BRENT
STREET ADDRESS ~~11552 HEMINGWAY DRIVE~~ **500 COMMONWEALTH AVE**
CITY-ST-ZIP ~~RESTON, VA 20194~~ **ALEXANDRIA VA 22301**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS →
CITY-ST-ZIP →

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Nicholas B. Desiderio* 4-4-08 585 385 6362