

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000030968

FILED  
Jan 21, 2008  
Secretary of State

**Entity Name:** TEAM ANASTASIO ENTERPRISES, LLC

**Current Principal Place of Business:**

917 MAR WALT DRIVE  
FORT WALTON BEACH, FL 32547 US

**New Principal Place of Business:**

**Current Mailing Address:**

917 MAR WALT DRIVE  
FORT WALTON BEACH, FL 32547 US

**New Mailing Address:**

**FEI Number:** 20-4678467

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANASTASIO, SANDRA  
917 MAR WALT DRIVE  
FORT WALTON BEACH, FL 32547 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: ANASTASIO, PATRICK  
Address: 917 MAR WALT DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: MGRM ( ) Delete  
Name: ANASTASIO, SANDRA  
Address: 917 MAR WALT DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547 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 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: SANDRA ANASTASIO

MGRM

01/21/2008

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