


FILED
May 24, 2007 8:00 am
Secretary of State

04-09-2007 90343 016 ****50.00

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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DOCUMENT # L06000051098					
1. Entity Name SERLEY ASSOCIATES, LLC					
Principal Place of Business 2112 STALLION RD. CANTONMENT, FL 32533 US			Mailing Address 2112 STALLION RD. CANTONMENT, FL 32533 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-4917972	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
SERLEY, MARK 2112 STALLION RD. CANTONMENT, FL 32533			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent (if not applicable) NOTE: Registered Agent signature required when necessary</small>					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME		NAME			
STREET ADDRESS		STREET ADDRESS			
CITY - ST - ZIP		CITY - ST - ZIP			
OWNER / OPERATOR					
MARK SERLEY					
2112 STALLION RD					
CANTONMENT FL 32533					
MANAGER	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
MARK SERLEY		NAME			
2112 STALLION RD		STREET ADDRESS			
CANTONMENT FL 32533		CITY - ST - ZIP			
	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
		NAME			
		STREET ADDRESS			
		CITY - ST - ZIP			
	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Mark Serley</u>		Date: <u>3-29-07</u>			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					

30008753



01162007 Chg-LLC CR2E083 (12/06)

4. FEI Number **20-4917972** Applied For Not Applicable

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

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent (if not applicable) NOTE: Registered Agent signature required when necessary

**Filing Fee is \$50.00
Due by May 1, 2007**

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	
OWNER / OPERATOR			
MARK SERLEY			
2112 STALLION RD			
CANTONMENT FL 32533			
MANAGER	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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2112 STALLION RD		STREET ADDRESS	
CANTONMENT FL 32533		CITY - ST - ZIP	
	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		NAME	
		STREET ADDRESS	
		CITY - ST - ZIP	
	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		NAME	
		STREET ADDRESS	
		CITY - ST - ZIP	

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SIGNATURE: Mark Serley Date: 3-29-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE