

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000058732

Entity Name: US ADVISORS, LLC

FILED
Feb 16, 2009
Secretary of State

Current Principal Place of Business:

3838 TAMIAMI TRAIL NORTH
SUITE 416
NAPLES, FL 34103 US

New Principal Place of Business:

2281 CLIPPER WAY
NAPLES, FL 34104 US

Current Mailing Address:

3838 TAMIAMI TRAIL NORTH
SUITE 416
NAPLES, FL 34103 US

New Mailing Address:

5830 COPPER LEAF LANE
NAPLES, FL 34116 US

FEI Number: 20-4946097

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IRC INVESTOR SERVICES LLC
3838 TAMIAMI TRAIL NORTH
SUITE 416
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

AC GLOBAL MANAGEMENT, LLC
5830 COPPER LEAF LANE
NAPLES, FL 34116 US

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: ANNETTE JUNG

02/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HERGENROEDER, UDO
Address: 3838 TAMIAMI TRAIL NORTH SUITE 416
City-St-Zip: NAPLES, FL 34103 US

Title: MGR () Delete
Name: ROMAN, DORIS
Address: 2281 CLIPPER WAY
City-St-Zip: NAPLES, FL 34104

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HERGENROEDER, UDO
Address: 2281 CLIPPER WAY
City-St-Zip: NAPLES, FL 34104 US

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: UDO HERGENROEDER

MGR

02/16/2009

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