

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000066241

**FILED**  
**Apr 30, 2009**  
**Secretary of State**

**Entity Name:** SATTER ADVISORY SERVICES, LLC

**Current Principal Place of Business:**

100 SOUTH OLIVE AVENUE  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

250 SOUTH AUSTRALIAN AVENUE  
1100  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

P.O. BOX 1592  
WEST PALM BEACH, FL 33402

**New Mailing Address:**

**FEI Number:** 20-5314253

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SATTER, JONATHAN  
100 S OLIVE AVE  
WEST PALM BEACH, FL 33401 US

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

SATTER, JONATHAN R  
100 S OLIVE AVE  
WEST PALM BEACH, FL 33401 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: JONATHAN R SATTER

04/30/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SATTER, JONATHAN R  
Address: P.O. BOX 1592  
City-St-Zip: WEST PALM BEACH, FL 33402

**ADDITIONS/CHANGES:**

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: JONATHAN R SATTER

MGR

04/30/2009

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