

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000077612

Entity Name: SULLIVAN & ASSOCIATES, LLC

FILED
Apr 18, 2009
Secretary of State

Current Principal Place of Business:

517 PONTE VEDRA BOULEVARD
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

517 PONTE VEDRA BOULEVARD
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 20-5329954

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATTERSON, ANDERSON & FELDMAN, P.A.
3010 SOUTH THIRD STREET
JACKSONVILLE BEACH, FL 32250 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: SULLIVAN, THOMAS L
Address: 517 PONTE VEDRA BOULEVARD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: SECR () Delete
Name: MARTIN, JOSEPH H
Address: 517 PONTE VEDRA BLVD
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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: THOMAS L. SULLIVAN

MGRM

04/18/2009

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