

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000108596

FILED  
Apr 09, 2007  
Secretary of State

**Entity Name:** TREMBLAY AND ASSOCIATES, LLC

**Current Principal Place of Business:**

1040 KAPP DRIVE  
CLEARWATER, FL 33765 US

**New Principal Place of Business:**

**Current Mailing Address:**

1040 KAPP DRIVE  
CLEARWATER, FL 33765 US

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

GIOVINCO, IAN S  
2202 N WESTSHORE BLVD  
SUITE 200  
TAMPA, FL 33607 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: TREMBLAY, PETER  
Address: 1040 KAPP DRIVE  
City-St-Zip: CLEARWATER, FL 33765 US

Title: MGRM ( ) Delete  
Name: TREMBLAY, DEBORAH  
Address: 1040 KAPP DRIVE  
City-St-Zip: CLEARWATER, FL 33765 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 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: PETER J TREMBLAY

PRES

04/09/2007

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