

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000109538

FILED
Apr 11, 2009
Secretary of State

Entity Name: FILSON, PANGALLO & TUSTIN, L.L.C.

Current Principal Place of Business:

12737 SOUTH TAMiami TRAIL
NORTH PORT, FL 34287

New Principal Place of Business:

Current Mailing Address:

12737 SOUTH TAMiami TRAIL
NORTH PORT, FL 34287

New Mailing Address:

FEI Number: 03-0613565

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILSON, RICHARD A ESQ.
2727 SOUTH TAMiami TRAIL STE 2
SARASOTA, FL 34239 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: MGR () Delete
Name: RICHARD A. FILSON, N.P., P.A.
Address: 12737 S. TAMiami TRAIL
City-St-Zip: NORTH PORT, FL 34287

Title: MGR () Delete
Name: LAW OFFICE OF JOHN J. PANGALLO II, P.A.
Address: 12737 S. TAMiami TRAIL
City-St-Zip: NORTH PORT, FL 34287

Title: MGR () Delete
Name: MICHELLE R. TUSTIN, P.A.
Address: 12737 S. TAMiami TRIAL
City-St-Zip: NORTH PORT, FL 34287

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MICHELLE R. TUSTIN

MGR

04/11/2009

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