

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000047989

FILED
Aug 09, 2008
Secretary of State

Entity Name: L'ANOA PROFESSIONAL SERVICES LLC

Current Principal Place of Business:

5263 N. DIXIE HIGHWAY
D - 1
OAKLAND PARK, FL 33334

New Principal Place of Business:

4872 N CITATION DRIVE
106
DELRAY BEACH, FL 33445 US

Current Mailing Address:

5263 N. DIXIE HIGHWAY
D - 1
OAKLAND PARK, FL 33334

New Mailing Address:

PO BOX 7986
DELRAY BEACH, FL 33482 US

FEI Number: 68-0649401 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MANISCALCO, LORRAINE J
2903 SABALWOOD COURT
DELRAY BEACH, FL 33445 US

Name and Address of New Registered Agent:

MANISCALCO, LORRAINE J
4872 N CITATION DRIVE
106
DELRAY BEACH, FL 33445 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: LORRAINE MANISCALCO

08/09/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MANISCALCO, LORRAINE J
Address: 2903 SABALWOOD COURT
City-St-Zip: DELRAY BEACH, FL 33445

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MANISCALCO, LORRAINE J
Address: 4872 N CITATION DRIVE UNIT 106
City-St-Zip: DELRAY BEACH, FL 33445 US

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: LORRAINE MANISCALCO

MGRM

08/09/2008

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