

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000072470

FILED  
Apr 07, 2008  
Secretary of State

**Entity Name:** ALAN COHEN AND ASSOCIATES, LLC

**Current Principal Place of Business:**

13969 MAGNOLIA GLEN CIRCLE  
ORLANDO, FL 32828 US

**New Principal Place of Business:**

**Current Mailing Address:**

200 S. ORANGE AVENUE  
SUITE 2300  
ORLANDO, FL 32801 US

**New Mailing Address:**

13969 MAGNOLIA GLEN CIRCLE  
ORLANDO, FL 32828 US

FEI Number: 34-0082025

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

A.G.C. CO.  
200 S. ORANGE AVENUE  
SUITE 2300  
ORLANDO, FL 32801 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: PRES ( ) Change (X) Addition  
Name: COHEN, ALAN  
Address: 13969 MAGNOLIA GLEN CIRCLE  
City-St-Zip: ORLANDO, FL 32828

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: ALAN COHEN

PRES

04/07/2008

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