

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000077603

Entity Name: ADULT ADVISORS, LLC

**FILED**  
**Feb 19, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

10430 S LAKE VISTA CIR  
DAVIE, FL 33328

**New Principal Place of Business:**

8870 W. OAKLAND PARK BLVD  
101  
SUNRISE, FL 33351

**Current Mailing Address:**

10430 S LAKE VISTA CIR  
DAVIE, FL 33328

**New Mailing Address:**

FEI Number: 26-0716888

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ZEDECK, LEONARD E ESQ  
13790 NW 4TH STREET STE 113  
SUNRISE, FL 33325 US

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

ZEDECK, LEONARD E ESQ  
8870 W. OAKLAND PARK BLVD  
101  
SUNRISE, FL 33351 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: LEONARD E. ZEDECK

02/19/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BILOTTI, MICHAEL  
Address: 10430 S LAKE VISTA CIRCLE  
City-St-Zip: DAVIE, FL 33328

I hereby 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: MICHAEL BILOTTI

MGRM

02/19/2010

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