

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000086984

FILED  
Feb 04, 2008  
Secretary of State

Entity Name: DEROCCO & POWERS LLC

**Current Principal Place of Business:**

57 CAYMAN PLACE  
PALM BEACH GARDENS, FL 33418 US

**New Principal Place of Business:**

**Current Mailing Address:**

57 CAYMAN PLACE  
PALM BEACH GARDENS, FL 33418 US

**New Mailing Address:**

FEI Number: 26-0783778      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

POWERS, SEAN  
57 CAYMAN PLACE  
PALM BEACH GARDENS, FL 33418 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: POWERS, SEAN  
Address: 57 CAYMAN PLACE  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: MGRM ( ) Delete  
Name: DEROCCO, JASON  
Address: 5 VIA DE CASAS SUR, #105  
City-St-Zip: BOYNTON BEACH, FL 33426 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 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: SEAN POWERS

MGRM

02/04/2008

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