

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000016205

Entity Name: PENTACON FL., LLC

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

400 S AUSTRALIAN AVE STE 300  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

400 S AUSTRALIAN AVE STE 300  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

FEI Number: 26-4339506

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KOEPPPEL, JOEL P  
400 S AUSTRALIAN AVE STE 300  
WEST PALM BEACH, FL 33401 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.  
Name: CONTE, ANTHONY C  
Address: 400 S AUSTRALIAN AVE STE 300  
City-St-Zip: WEST PALM BEACH, FL 33401

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: ANTHONY CONTE

MGR.

02/16/2010

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