

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000093316

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Entity Name:** DEBT NEGOTIATION ASSOCIATES LLC

**Current Principal Place of Business:**

12995 S. CLEVELAND AVE.  
SUITE 245  
FORT MYERS, FL 33907 US

**New Principal Place of Business:**

**Current Mailing Address:**

12995 S. CLEVELAND AVE.  
SUITE 245  
FORT MYERS, FL 33907 US

**New Mailing Address:**

**FEI Number:** 26-3471041

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

STREYFFELER, KURT  
2211 PECK ST.  
SUITE 250  
FORT MYERS, FL 33901 US

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

STREYFFELER, KURT  
2211 WYDMAN WAY  
SUITE 250  
FORT MYERS, FL 33901 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:**

01/06/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** SKY, SAM T  
**Address:** 12995 S. CLEVELAND AVE. SUITE 245  
**City-St-Zip:** FORT MYERS, FL 33907

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:** SAM T SKY

MGRM

01/06/2010

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