

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000093642

**FILED**  
**Jul 03, 2010**  
**Secretary of State**

**Entity Name:** LASSEVILLE & ASSOCIATES, LLC

**Current Principal Place of Business:**

66 WEST FLAGLER STREET  
SUITE 1001  
MIAMI, FL 33130

**New Principal Place of Business:**

999 BRICKELL BAY DRIVE  
SUITE 1210  
MIAMI, FL 33131

**Current Mailing Address:**

66 WEST FLAGLER STREET  
SUITE 1001  
MIAMI, FL 33130

**New Mailing Address:**

999 BRICKELL BAY DRIVE  
SUITE 1210  
MIAMI, FL 33131

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

ZIDEL, MITCHELL ESQ.  
66 WEST FLAGLER STREET  
SUITE 1002  
MIAMI, FL 33130 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  
Name: LASSEVILLE, JOHN  
Address: 999 BRICKELL BAY DRIVE, SUITE 1210  
City-St-Zip: MIAMI, FL 33131

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: JOHN LASSEVILLE

MGRM

07/03/2010

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