

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000088648

FILED  
Apr 02, 2010  
Secretary of State

**Entity Name:** PERSON & TOLSON, CPA FIRM LLC

**Current Principal Place of Business:**

1413 S. PATRICK DRIVE  
SUITE 7  
INDIAN HARBOUR BEACH, FL 32937 US

**New Principal Place of Business:**

262 E MERRITT ISLAND CAUSEWAY  
SUITE 14  
MERRITT ISLAND, FL 32952 US

**Current Mailing Address:**

1413 S. PATRICK DRIVE  
SUITE 7  
INDIAN HARBOUR BEACH, FL 32937 US

**New Mailing Address:**

**FEI Number:** 27-0933198      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

PERSON, DOUGLASS A  
1413 S. PATRICK DRIVE  
SUITE 7  
INDIAN HARBOUR BEACH, FL 32937 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:** PERSON, DOUGLASS A  
**Address:** 1413 S. PATRICK DRIVE, SUITE 7  
**City-St-Zip:** INDIAN HARBOUR BEACH, FL 32937 US

**Title:** MGRM  
**Name:** LAURA, TOLSON D  
**Address:** 3311 TIPPERARY DRIVE  
**City-St-Zip:** MERRITT ISLAND, FL 32953

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: DOUGLASS A PERSON      MGRM      04/02/2010

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