

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000090882

FILED  
Feb 17, 2011  
Secretary of State

Entity Name: CMA ADVISORY GROUP,LLC

**Current Principal Place of Business:**

6220 SOUTH ORANGE BLOSSOM TRAIL  
STE. 143  
ORLANDO, FL 32809

**New Principal Place of Business:**

**Current Mailing Address:**

6220 SOUTH ORANGE BLOSSOM TRAIL  
STE. 143  
ORLANDO, FL 32809

**New Mailing Address:**

FEI Number: 27-0836874

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RUSSO, RANDY D  
6220 SOUTH ORANGE BLOSSOM TRAIL  
STE. 143  
ORLANDO, FL 32809 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: RUSSO, DAVID A  
Address: 9548 BAYCLIFF COURT  
City-St-Zip: ORLANDO, FL 32836

Title: MGR  
Name: RUSSO, BARBARA G  
Address: 9548 BAYCLIFF COURT  
City-St-Zip: ORLANDO, FL 32836

Title: MGR  
Name: TEETER, LINDSAY R  
Address: 11642 PEACH GROVE LANE  
City-St-Zip: ORLANDO, FL 32821

Title: MGRM  
Name: ASHLEY, KARL C  
Address: 1630 PARK AVENUE  
City-St-Zip: AMELIA ISLAND, FL 32034

Title: MGRM  
Name: BOGGS, BROOK S  
Address: 3865 WHITE BIRCH RUN  
City-St-Zip: WINTER SPRINGS, FL 32708

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: DAVID A RUSSO

MGR

02/17/2011

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