

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000050330

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** ELLISON JAMESON CASTELLANA ASSOCIATES LLC

**Current Principal Place of Business:**

2202 N. WEST SHORE BLVD.  
SUITE 200  
TAMPA, FL 33607 US

**New Principal Place of Business:**

**Current Mailing Address:**

2202 N WEST SHORE BLVD  
# 200  
TAMPA, FL 33607 US

**New Mailing Address:**

2202 N. WEST SHORE BLVD.  
SUITE 200  
TAMPA, FL 33607 US

**FEI Number:** 45-2549394

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JAMESON, STEPHEN  
2202 N WEST SHORE BLVD  
# 200  
TAMPA, FL 33607 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: ELLISON, DONALD H  
Address: 2202 N. WESTSHORE BLVD, #200  
City-St-Zip: TAMPA, FL 33607

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: DONALD H. ELLISON

MGR

03/21/2012

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