

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000071454

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** SUNCOAST ADVISORY LLC

**Current Principal Place of Business:**

4500 140TH AVE NORTH  
SUITE 101  
CLEARWATER, FLORIDA, 33762 US

**New Principal Place of Business:**

4500 140TH AVE NORTH  
SUITE 101  
CLEARWATER, FL 33762 US

**Current Mailing Address:**

4500 140TH AVE NORTH  
SUITE 101  
CLEARWATER, FLORIDA, 33762 US

**New Mailing Address:**

4500 140TH AVE NORTH  
SUITE 101  
CLEARWATER, FL 33762 US

**FEI Number:** 45-2569739

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

STEINHEIMER, WALTER  
11750 84TH AVE NORTH  
SEMINOLE, FL 33772 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:** MOTRAN, GEORGE  
**Address:** 3643 MUNNINGS KNOLL  
**City-St-Zip:** LAND O LAKES, FL 34639 US

**Title:** MGR  
**Name:** STEINHEIMER, WALTER  
**Address:** 11750 84TH AVE N  
**City-St-Zip:** SEMINOLE, FL 337762 US

**Title:** MGR  
**Name:** HARTENECK, RAINER  
**Address:** 13767 SPOONBILL LANE  
**City-St-Zip:** CLEARWATER, FL 33762 US

**Title:** MGR  
**Name:** GRAHAM, BRIAN  
**Address:** 1385 FORESTEDGE BLVD  
**City-St-Zip:** OLDSMAR, FL 34677 US

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:** WALTER STEINHEIMER

MGRM

02/08/2012

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