

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000001573

FILED  
Jan 16, 2006  
Secretary of State

Entity Name: PASSERO ASSOCIATES, L.L.C.

**Current Principal Place of Business:**

1405 PARK AVENUE  
STE 201  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

100 LIBERTY POLE WAY  
ROCHESTER, NY 14604

**New Mailing Address:**

FEI Number: 58-2464511

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NATIONAL CORPORATE RESEARCH, LTD., INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 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 ( ) Delete  
Name: PASSERO, GARY W  
Address: 656 LAKE ROAD  
City-St-Zip: WEBSTER, NY 14580

Title: MGR ( ) Delete  
Name: HOLESKO, ANDREW  
Address: 1920 WOODLAKE DRIVE  
City-St-Zip: ORANGE PARK, FL 32073

Title: MGR ( ) Delete  
Name: WEGMAN, WAYNE  
Address: 7 WOODFIELD DRIVE  
City-St-Zip: WEBSTER, NY 14580

Title: MGR ( ) Delete  
Name: CARUSO, JOHN  
Address: 13 TALOS WAY  
City-St-Zip: ROCHESTER, NY 14624

Title: MGR ( ) Delete  
Name: PASSERO, DAVID K  
Address: 17 SANFILIPPO CIRCLE  
City-St-Zip: ROCHESTER, NY 14625

Title: MGR ( ) Delete  
Name: SAVAGE, DAN  
Address: 37 SHEFFERTON WAY  
City-St-Zip: ROCHESTER, NY 14626

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: PASSERO, DAVID K  
Address: 1007 LAQUINTA DRIVE  
City-St-Zip: WEBSTER, NY 14580

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 K PASSERO

MGR

01/16/2006

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