

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000725

FILED  
Jan 28, 2005  
Secretary of State

**Entity Name:** SCHAFFER & ASSOCIATES INTERNATIONAL, L.L.C.

**Current Principal Place of Business:**

1020 FLORIDA STREET  
BATON ROUGE, LA 70802

**New Principal Place of Business:**

**Current Mailing Address:**

1020 FLORIDA STREET  
BATON ROUGE, LA 70802

**New Mailing Address:**

**FEI Number:** 72-1460490

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VILLAGELIU, A E  
9990 N.W. 9TH STREET CIRCLE UNIT 101  
MIAMI, FL 33172 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/MEMBERS:**

Title: MGRM ( ) Delete  
Name: HAROLD, BIRKETT  
Address: 12422 N OAK HILL PKWY  
City-St-Zip: BATON ROUGE, LA

Title: MGRM ( ) Delete  
Name: GRAPHIA, GERALYN G  
Address: 12221 SCHLAYER AVE.  
City-St-Zip: BATON ROUGE, LA

Title: MGRM ( ) Delete  
Name: MILLER, ROBERT D  
Address: 5434 HICKORY RIDGE BLVD  
City-St-Zip: BATON ROUGE, LA

Title: MGRM ( ) Delete  
Name: MITCH, MARLAN J  
Address: 10449 BRONZE BUSH AVE.  
City-St-Zip: BATON ROUGE, LA

Title: MGRM ( ) Delete  
Name: NEDELCOVYCH, MIMA S  
Address: 2208 MILBURN LANE  
City-St-Zip: RESTON, VA

Title: MGRM ( ) Delete  
Name: SCHAFFER, FRANCIS C  
Address: 4174 DOWNING DRIVE  
City-St-Zip: BATON ROUGE, LA

**ADDITIONS/CHANGES:**

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

Title: MGRM (X) Change ( ) Addition  
Name: CONTINI, GERALYN G  
Address: 12221 SCHLAYER AVE.  
City-St-Zip: BATON ROUGE, LA

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: GERALYN CONTINI

MGRM

01/28/2005

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