

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 31, 2005 8:00 am
Secretary of State

05-31-2005 90647 015 ****50.00

DOCUMENT # M02000002365

1. Entity Name
STERLING-TAMPA FL, LLC



Principal Place of Business
**2700 GRAND AVENUE
BELLMORE, NY 11710**

Mailing Address
**2700 GRAND AVENUE
BELLMORE, NY 11710**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05252005 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by September 7, 2005**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
THURMAN, HAROLD
2700 GRAND AVENUE
BELLMORE, NY 11710** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
THURMAN, BRAD
2700 GRAND AVENUE
BELLMORE, NY 11710** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
CONSELVAS, PATRICK J.
2700 GRAND AVENUE
BELLMORE, NY 11710** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**CONSELVAS, PATRICK J.
124 EAST MAIN STREET
BAYLON, NY 11702** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
BONCARDO, NICHOLAS J
2700 GRAND AVENUE
BELLMORE, NY 11710** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**538 WENTCHESTER AVENUE
RYE BROOK, NY 10573** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
WALZER, WILLIAM
2700 GRAND AVENUE
BELLMORE, NY 11710** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**666 OLD COUNTRY RD-STE 908
OLD WESTBURY, NY 11530** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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: X

HAROLD THURMAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone