

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000228

Entity Name: ANSCO & ASSOCIATES, LLC

FILED  
Feb 09, 2009  
Secretary of State

## Current Principal Place of Business:

2-A OAK BRANCH DRIVE  
GREENSBORO, NC 27407

## New Principal Place of Business:

## Current Mailing Address:

11770 U. S. HIGHWAY 1  
SUITE 101  
PALM BEACH GARDENS, FL 33408

## New Mailing Address:

FEI Number: 22-3882751

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: NIELSEN, STEVEN  
Address: 11770 U.S. HIGHWAY 1, SUITE 101  
City-St-Zip: PALM BEACH GARDENS, FL 33408

Title: MGR ( ) Delete  
Name: DUNN, RICHARD L  
Address: 11770 U.S. HIGHWAY 1, SUITE 101  
City-St-Zip: PALM BEACH GARDENS, FL 33408

## ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition  
Name: DEFERRARI, H. ANDREW  
Address: 11770 U.S. HIGHWAY 1, SUITE 101  
City-St-Zip: PALM BEACH GARDENS, FL 33408

I hereby certify that the information supplied with this filing does not qualify 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: H. ANDREW DEFERRARI

MGR

02/09/2009

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