

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001646

Entity Name: ALDERMAN - 19, LLC

FILED  
Jul 10, 2008  
Secretary of State

**Current Principal Place of Business:**

C/O SKILKEN PROPERTIES  
4270 MORSE ROAD  
COLUMBUS, OH 43230

**New Principal Place of Business:**

**Current Mailing Address:**

C/O SKILKEN PROPERTIES  
4270 MORSE ROAD  
COLUMBUS, OH 43230

**New Mailing Address:**

FEI Number: 20-0028420

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: SKILKEN, B. LEE  
Address: 4270 MORSE ROAD  
City-St-Zip: COLUMBUS, OH 43230

Title: MGR ( ) Delete  
Name: GOLD, KENNETH B  
Address: 4270 MORSE ROAD  
City-St-Zip: COLUMBUS, OH 43230

Title: MGR ( ) Delete  
Name: PETRUZIELLO, FRANK R  
Address: 4270 MORSE ROAD  
City-St-Zip: COLUMBUS, OH 43230

**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:

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: FRANK R. PETRUZIELLO

MGR

07/10/2008

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

07-

04:06pm From-

T-920 P.002/002 F-086

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Alderman-19, LLC

4270 Morse Road  
Columbus, OH 43230Tel 614.418.3100  
Fax 614.418.3101

www.skilken.com

**M03000001646**VIA FACSIMILE 850-245-6030

Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314  
Attn: Brenda Tadlock

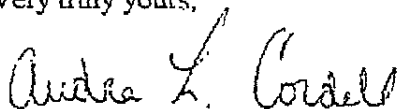
**RE: Alderman - 19, LLC Annual Filing; M03000001646**

Dear Ms. Tadlock:

Pursuant to our conversation earlier today, please accept this letter as a request for remission of the \$400.00 penalty charged on the above referenced entity's annual report filing. Our office never received the initial notice regarding the annual filing. In fact we received no notice until the Notice of Dismissal. In an attempt to correct the issue I filed the report online but was remiss in checking the box regarding the \$400.00 penalty, resulting in the penalty not being removed from our filing. As we discussed, when I attempted to correct the mistake by calling your customer service hotline, I encountered a customer service agent who was less than helpful. She stated that she could not help me, her exact words were that the "money is ours now". She also said that my company was not entitled to a refund. She refused to offer any further help in the matter.

I want to thank you for taking the time to call me to address the issue. I truly appreciate your help with this matter. I apologize for not being able to offer the name of the woman I spoke with. Please feel free to contact me if there is anything further you need from me. Otherwise, please forward the \$400.00 reimbursement to my attention at the above referenced address. Please make the check payable to Alderman - 19, LLC. Thank you again for all of your help.

Very truly yours,



Audra L. Cordell

WEB  
\$390.00