

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 27, 2005 8:00 am
Secretary of State

01-27-2005 90078 018 ****50.00

DOCUMENT # M04000000302

1. Entity Name
EQUITY ADVANTAGE LLC



Principal Place of Business
~~25 SOUTH LIVINGSTON AVENUE~~
~~LIVINGSTON, NJ 07039~~

Mailing Address
~~25 SOUTH LIVINGSTON AVENUE~~
~~LIVINGSTON, NJ 07039~~

20004333



01142005 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business

33 CLINTON ROAD

Suite, Apt. #, etc.

SUITE 201

City & State

WEST CALDWELL NJ

Zip
07006

Country
USA

3. Mailing Address

33 CLINTON ROAD

Suite, Apt. #, etc.

SUITE 201

City & State

WEST CALDWELL NJ

Zip
07006

Country
USA

4. FEI Number
27-0028308

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

7. Name and Address of New Registered Agent

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 May 1, 2005

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete
NAME **TURANICK, TERRENCE**
STREET ADDRESS **25 SOUTH LIVINGSTON AVENUE**
CITY-ST-ZIP **LIVINGSTON, NJ 07039**

TITLE **MGR** ☐ Delete
NAME **MOORHOUSE, STEPHEN**
STREET ADDRESS **25 SOUTH LIVINGSTON AVENUE**
CITY-ST-ZIP **LIVINGSTON, NJ 07039**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **33 CLINTON ROAD SUITE 201**
CITY-ST-ZIP **WEST CALDWELL NJ 07006**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **33 CLINTON RD SUITE 201**
CITY-ST-ZIP **WEST CALDWELL NJ 07006**

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

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

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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

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:

Terrence Turanick

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

Date

Daytime Phone #

1/14/05 973 882 8022