

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000004572

**FILED**  
**Apr 12, 2012**  
**Secretary of State**

**Entity Name:** BELTONE HEARING CENTERS OF FLORIDA, LLC.

**Current Principal Place of Business:**

10300 US HWY 441 SOUTH  
SUITE 6  
LEESBURG, FL 34788

**New Principal Place of Business:**

**Current Mailing Address:**

10300 US HWY 441 SOUTH  
SUITE 6  
LEESBURG, FL 34788

**New Mailing Address:**

**FEI Number:** 20-3275122

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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  
**Name:** ANDREOZZI, MICHEAL  
**Address:** 931 JEFFERSON BLVD  
**City-St-Zip:** WARWICK, RI 02886

**Title:** MGR  
**Name:** GIAMPAOLO, PAUL  
**Address:** 2601 PATRIOT BLVD  
**City-St-Zip:** GLENVIEW, IL 60026

**Title:** MGR  
**Name:** RESSLER, DOUGLAS L  
**Address:** 10300 US HWY 441 SOUTH SUITE 6  
**City-St-Zip:** LEESBURG, FL 34788

I hereby 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:** JOHN KASHER

VP

04/12/2012

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