

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000000958

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** BRIAN A. COLE & ASSOCIATES, LTD. LIABILITY COMPANY

**Current Principal Place of Business:**

13001 ATHENS AVE. #250  
LAKEWOOD, OH 44107

**New Principal Place of Business:**

2035 CROCKER ROAD  
210  
WESTLAKE, OH 44145

**Current Mailing Address:**

13001 ATHENS AVE. #250  
LAKEWOOD, OH 44107

**New Mailing Address:**

2035 CROCKER ROAD  
210  
WESTLAKE, OH 44145

**FEI Number:** 34-1941618

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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: COLE, BRIAN A  
Address: 2035 CROCKER ROAD #210  
City-St-Zip: WESTLAKE, OH 44145

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: BRIAN A. COLE

MGR

04/26/2011

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