

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000001274

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: ONSITEAM ADVISORS LLC

**Current Principal Place of Business:**

200 S BISCAYNE BLVD  
6TH FLOOR  
MIAMI, FL 33131

**New Principal Place of Business:**

**Current Mailing Address:**

200 S BISCAYNE BLVD  
6TH FLOOR  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 65-0978204      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BERKOWITZ, RICHARD A  
200 S. BISCAYNE BLVD.  
6TH FLOOR  
MIAMI, FL 33131 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: MGRM ( ) Delete  
Name: BERKOWITZ, RICHARD A  
Address: 200 S BISCAYNE BLVD., 6TH FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: MGRM ( ) Delete  
Name: SCHULTZ, TERENCE A  
Address: 200 S BISCAYNE BLVD., 6TH FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: MGRM ( ) Delete  
Name: POLLACK, RICHARD A  
Address: 200 S BISCAYNE BLVD., 6TH FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: MGRM ( ) Delete  
Name: BRANT, BARRY M  
Address: 200 S BISCAYNE BLVD., 6TH FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: MGRM ( ) Delete  
Name: YOUNG, JOHN F  
Address: 200 S BISCAYNE BLVD., 6TH FLOOR  
City-St-Zip: MIAMI, FL 33131

Title: MGRM ( ) Delete  
Name: ROSENTHAL, GARY E  
Address: 200 S BISCAYNE BLVD., 6TH FLOOR  
City-St-Zip: MIAMI, FL 33131

**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:

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: RICHARD A. BERKOWITZ

RA

03/23/2009

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