

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED  
Feb 07, 2011  
Secretary of State

Entity Name: STICKHEAD LACROSSE, LLC

**Current Principal Place of Business:**

500 N.E. SPANISH RIVER BOULEVARD  
SUITE 21  
BOCA RATON, FL 33431 US

**New Principal Place of Business:**

**Current Mailing Address:**

500 N.E. SPANISH RIVER BOULEVARD  
SUITE 21  
BOCA RATON, FL 33431 US

**New Mailing Address:**

FEI Number: 26-1256030

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MILLER, CHARLES E MR.  
500 N.E. SPANISH RIVER BLVD  
SUITE 21  
BOCA RATON, FL 33431 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: MILLER, CHARLES E  
Address: 500 NE SPANISH RIVER BLVD. #21  
City-St-Zip: BOCA RATON, FL 33431

Title: MGR  
Name: SWEENEY, DANIEL D  
Address: 500 NE SPANISH RIVER BLVD. #21  
City-St-Zip: BOCA RATON, FL 33431

Title: MGR  
Name: RAFTER, WILLIAM R  
Address: 500 NE SPANISH RIVER BLVD #21  
City-St-Zip: BOCA RATON, FL 33431

Title: MGR  
Name: ALLEN, BILL  
Address: 500 NE SPANISH RIVER BLVD. #21  
City-St-Zip: BOCA RATON, FL 33431

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: DANIEL D. SWEENEY

MGR

02/07/2011

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