

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000002656

Entity Name: TENNIS TERROR, LLC

FILED  
Apr 15, 2011  
Secretary of State

**Current Principal Place of Business:**

3931 FAWN Mist DRIVE  
WESLEY CHAPEL, FL 33543 US

**New Principal Place of Business:**

17201 COLLINS AVE  
APT 2305  
SUNNY ISLES BEACH, FL 33160 US

**Current Mailing Address:**

1774 RAMONA DR.  
CAMARILLO, CA 93010 US

**New Mailing Address:**

17201 COLLINS AVE  
APT 2305  
SUNNY ISLES BEACH, FL 33160 US

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

ALVAREZ, MICHELLE  
17201 COLLINS AVE  
APT 4005  
SUNNY ISLES BEACH, FL 33160 US

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

ALVAREZ, MICHELLE  
17201 COLLINS AVE  
APT 2305  
SUNNY ISLES BEACH, FL 33160 US

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

04/15/2011

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BRYAN, MICHAEL  
Address: 3931 FAWN Mist DRIVE APT 4005  
City-St-Zip: WESLEY CHAPEL, FL 33543 US

Title: MGRM  
Name: BRYAN, ROBERT  
Address: 17201 COLLINS AVE. APT 2305  
City-St-Zip: SUNNY ISLES BEACH, FL 33160 US

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: BOB BRYAN

MGRM

04/15/2011

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