

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000004093

**Entity Name:** 491 NW BROKEN TRAIL LLC

**FILED**  
**Jan 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

95 MAIN STREET  
TUCKAHOE, NY 10707

**New Principal Place of Business:**

**Current Mailing Address:**

95 MAIN STREET  
TUCKAHOE, NY 10707

**New Mailing Address:**

**FEI Number:** 27-2873877

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIBERATO, DIANE C  
4529 INDIAN OAK CT.  
JENSEN BEACH, FL 34957 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: MACDONALD, PHILLIS M  
Address: 95 MAIN STREET  
City-St-Zip: TUCKAHOE, NY 10707

Title: MGR  
Name: MACDONALD, FRANK  
Address: 95 MAIN STREET  
City-St-Zip: TUCKAHOE, NY 10707

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: PHILLIS MACDONALD

MGR

01/11/2011

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