

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000066969

Entity Name: ADAMAN,LLC

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

122 EAST 8TH STREET  
CHULOTA, FL 32766

**New Principal Place of Business:**

**Current Mailing Address:**

122 EAST 8TH STREET  
CHULOTA, FL 32766

**New Mailing Address:**

FEI Number: 27-2950405

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

GETMAN, ROBERT E  
122 EAST 8TH STREET  
CHULOTA, FL 32766 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  
Name: ADAMS, RICHARD L  
Address: 1670 CRACKER CREEK CT.  
City-St-Zip: OVIEDO, FL 32765 US

Title: MGRM  
Name: GETMAN, ROBERT E  
Address: 122 EAST 8TH STREET  
City-St-Zip: CHULOTA, FL 32766 US

Title: MGR  
Name: GETMAN, KAREN S  
Address: 122 EAST 8TH STREET  
City-St-Zip: CHULOTA, FL 32766 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: ROBERT GETMAN

MAN

04/21/2011

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