

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000112288

**Entity Name:** THE TIGER'S DEN LLC

**Current Principal Place of Business:**

4606 CLYDE MORRIS BLVD.  
STE 2P  
PORT ORANGE, FL 32128

**Current Mailing Address:**

P.O. BOX 214432  
SOUTH DAYTONA, FL 32121-4432

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ALDRICH, MARY  
4606 CLYDE MORRIS BLVD  
STE 2P  
PORT ORANGE, FL 32128 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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name ALDRICH, MARY  
Address PO BOX 214432  
City-State-Zip: SOUTH DAYTONA FL 32121-4432

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARY ALDRICH

MM

04/30/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date