

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000009928

Entity Name: ANNYA, LLC**Current Principal Place of Business:**9 CARD SOUND DR.
KEY LARGO, FL 33037**Current Mailing Address:**9 CARD SOUND DR.
KEY LARGO, FL 33037 US**FEI Number: 80-0144386****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NICHOLAS, CSENDES
9 CARD SOUND DR.
KEY LARGO, FL 33037 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	CSENDES, NICHOLAS
Address	9 CARD SOUND DR.
City-State-Zip:	KEY LARGO FL 33037

Title	MGRM
Name	CSENDES, MARLENE
Address	9 CARD SOUND DR.
City-State-Zip:	KEY LARGO FL 33037

Title	MGRM
Name	RICARD, EMILY
Address	9 CARD SOUND DR.
City-State-Zip:	KEY LARGO FL 33037

Title	MGRM
Name	CSENDES, CHRISTOPHER
Address	9 CARD SOUND DR.
City-State-Zip:	KEY LARGO FL 33037

Title	MGRM
Name	CSENDES, ROBERT
Address	9 CARD SOUND DR.
City-State-Zip:	KEY LARGO FL 33037

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: NICHOLAS CSENDES**MGRM****01/07/2013**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date