

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000005921

**FILED**  
**Apr 15, 2011**  
**Secretary of State**

**Entity Name:** LODER MANAGEMENT ASSOCIATES, LLC

**Current Principal Place of Business:**

3001 EXECUTIVE DRIVE  
SUITE 217  
CLEARWATER BEACH, FL 33763 US

**New Principal Place of Business:**

**Current Mailing Address:**

3001 EXECUTIVE DRIVE  
SUITE 217  
CLEARWATER BEACH, FL 33762 US

**New Mailing Address:**

**FEI Number:** 59-3653906

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CAMPUZANO, LUIS M  
3001 EXECUTIVE DRIVE  
SUITE 217  
CLEARWATER, FL 33762 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:** LODER, MATTHEW  
**Address:** POST OFFICE BOX 99  
**City-St-Zip:** INDIAN ROCKS BEACH, FL 33785 US

**Title:** MGR  
**Name:** POWERS, GREGORY P  
**Address:** POST OFFICE BOX 25  
**City-St-Zip:** INDIAN ROCKS BEACH, FL 33785 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:** GREG POWERS

MGR

04/15/2011

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