

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000008617

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Entity Name:** MUNO, SUMMERS & ASSOCIATES, LLC

**Current Principal Place of Business:**

12802 EAGLES ENTRY DRIVE  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 882  
OLDSMAR, FL 34677

**New Mailing Address:**

**FEI Number:** 65-1115757

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SUMMERS, JEFF  
5300 W CYPRESS ST  
STE 247  
TAMPA, FL 33607 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: SUMMERS, JEFFREY A  
Address: 12802 EAGLES ENTRY DRIVE  
City-St-Zip: ODESSA, FL 33556

Title: MGRM  
Name: DEBORAH MUNO SUMMERS  
Address: 12802 EAGLES ENTRY DRIVE  
City-St-Zip: ODESSA, FL 33556

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: DEBORAH MUNO SUMMERS

MGRM

03/30/2010

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