

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000014906

Entity Name: ARTHUR R. LOUV LLC

**FILED**  
**Jan 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

235 N. WESTMONTE DRIVE  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

235 N. WESTMONTE DRIVE  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

FEI Number: 59-3747957

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ARL LAW PLC  
235 N. WESTMONTE DRIVE  
ALTAMONTE SPRINGS, FL 32714 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: LOUV, ARTHUR R MGR  
Address: 235 N. WESTMONTE DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGR  
Name: LOUV, CHRISTINA B MGR  
Address: 235 N. WESTMONTE DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGR  
Name: LOUV, ROBERT A MGR  
Address: 235 N. WESTMONTE DRIVE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: ARTHUR R. LOUV

MGR

01/14/2011

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