

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000013552

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

**Entity Name:** E-Z STREET RENTALS LLC

**Current Principal Place of Business:**

15605 BAY VISTA DR  
CLERMONT, FL 34714

**New Principal Place of Business:**

15605 BAY VISTA DR  
CLERMONT, FL 34714 US

**Current Mailing Address:**

15605 BAY VISTA DR  
CLERMONT, FL 34714

**New Mailing Address:**

15605 BAY VISTA DR  
CLERMONT, FL 34714 US

**FEI Number:** 04-3701621

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SULLIVAN, TIMOTHY S  
15605 BAY VISTA DR  
CLERMONT, FL 34714 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:** SULLIVAN, TIMOTHY S  
**Address:** 15605 BAY VISTA DR  
**City-St-Zip:** CLERMONT, FL 34714 US

**Title:** MGR  
**Name:** SULLIVAN, AMY N  
**Address:** 15605 BAY VISTA DR  
**City-St-Zip:** CLERMONT, FL 34714 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:** TIMOTHY S. SULLIVAN

MGR

04/14/2011

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