

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000033850

Entity Name: FATBRAIN, LLC

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

**Current Principal Place of Business:**

9814 TREE TOPS LK RD  
TAMPA, FL 33626

**New Principal Place of Business:**

**Current Mailing Address:**

9814 TREE TOPS LK RD  
TAMPA, FL 33626

**New Mailing Address:**

FEI Number: 04-3735723

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROSENE, JAMES MANAGER  
9814 TREETOPS LAKE ROAD  
TAMPA, FL 33626 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: ROSENE, JAMES  
Address: 9814 TREE TOPS LK RD  
City-St-Zip: TAMPA, FL 33626

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: JAMES ROSENE

MGRM

02/15/2011

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