

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000003712

Entity Name: M. LIFFRIG, LLC

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

9210 HIGHLAND RIDGE WAY  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

9210 HIGHLAND RIDGE WAY  
TAMPA, FL 33647

**New Mailing Address:**

FEI Number: 33-1049857

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BURKE, LESLIE  
9210 HIGHLAND RIDGE WAY  
TAMPA, FL 33647 US

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

BURKE, LESLIE A  
9210 HIGHLAND RIDGE WAY  
TAMPA, FL 33647 US

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: LESLIE A. BURKE

01/05/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BURKE, LESLIE A  
Address: 9210 HIGHLAND RIDGE WAY  
City-St-Zip: TAMPA, FL 33647

Title: MGRM  
Name: LIFFRIG, CORY  
Address: 9240 HIGHLAND RIDGE WAY  
City-St-Zip: TAMPA, FL 33647

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: LESLIE A BURKE

MGRM

01/05/2011

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