

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000027128

Entity Name: REID ENTERPRISES, LLC

**FILED**  
**Feb 09, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

192 BEAR FOOT TRAIL  
ORMOND BEACH, FL 32174

## **New Principal Place of Business:**

1714 WEEPING ELM CIR  
PORT ORANGE, FL 32128

## **Current Mailing Address:**

P.O. BOX 730142  
ORMOND BEACH, FL 321730142

## **New Mailing Address:**

P.O. BOX 730142  
ORMOND BEACH, FL 321730142 US

FEI Number: 81-0627246

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

REID, ROBERT W  
192 BEAR FOOT TRAIL  
ORMOND BEACH, FL 32174 US

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

REID, ROBERT W JR  
1714 WEEPING ELM CIR  
PORT ORANGE, FL 32128 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: ROBERT W REID JR

02/09/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: REID, ROBERT W JR  
Address: 1714 WEEPING ELM CIR  
City-St-Zip: PORT ORANGE, FL 32128 US

Title: MGR  
Name: REID, ELIZABETH A  
Address: 75-5919 ALII DR  
City-St-Zip: KAILUA-KONA, HI 96740 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: ROBERT W REID JR

MGR

02/09/2011

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