

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000003629

Entity Name: PUPSICLES, LLC

**FILED**  
**Jan 24, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

527 SOUTH MAIN STRET  
WILDWOOD, FL 34785

**New Principal Place of Business:**

**Current Mailing Address:**

527 SOUTH MAIN STRET  
WILDWOOD, FL 34785

**New Mailing Address:**

FEI Number: 54-2140498

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARCHBANKS, LAWRENCE J  
110 CLEVELAND AVENUE  
WILDWOOD, FL 34785 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: MCBRIDE, A. LEIGH  
Address: 839 COUNTY ROAD 231  
City-St-Zip: WILDWOOD, FL 34785

Title: MGRM  
Name: MCDONALD, ALISON N  
Address: 10009 EAST GULF TO LAKE HIGHWAY  
City-St-Zip: INVERNESS, FL 34450

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: ALISON N. MCDONALD

MS

01/24/2012

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