

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071850

Entity Name: LIBERTY COLLECTIONS LLC

FILED  
Mar 05, 2009  
Secretary of State

**Current Principal Place of Business:**

4005 E. HUMPHREY ST/ 8720 N. GREENWOOD AVE  
TAMPA, FL 33617

**New Principal Place of Business:**

**Current Mailing Address:**

27251 SR 54 SUITE B-14 / 225  
WESLEY CHAPEL, FL 33544

**New Mailing Address:**

FEI Number: 20-1698928

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AUVIL, ALECIA L RA  
27709 SKYLAKE CIRCLE  
WESLEY CHAPEL, FL 33544 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 ( ) Delete  
Name: MASTERS, NIK MGRM  
Address: 27251 SR 54 SUITE B-14 / 225  
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: MGRM ( ) Delete  
Name: AUVIL, ALECIA L MGRM  
Address: 27251 SR 54 SUITE B-14 / 225  
City-St-Zip: WESLEY CHAPEL, FL 33544

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MASTERS, NIK MGR  
Address: 27251 SR 54 SUITE B-14 / 225  
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: MGR (X) Change ( ) Addition  
Name: AUVIL, ALECIA L MGR  
Address: 27251 SR 54 SUITE B-14 / 225  
City-St-Zip: WESLEY CHAPEL, FL 33544

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: NIK MASTERS

MGR

03/05/2009

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