

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000066090

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** MCBRIDE MARKETING GROUP, LLC

**Current Principal Place of Business:**

668 LAW STREET  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

668 LAW STREET  
MELBOURNE, FL 32935

**New Mailing Address:**

**FEI Number:** 20-3016413

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLAIRE SUZANNE MCBRIDE  
412 PORT ROYAL BLVD.  
SATELLITE BEACH, FL 32937 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:** MICHAEL NOLAN MCBRIDE  
**Address:** 412 PORT ROYAL BLVD.  
**City-St-Zip:** SATELLITE BEACH, FL 32937

**Title:** MGR  
**Name:** ZAVALLA, ANDREW A  
**Address:** 1909 SLONE BLVD.  
**City-St-Zip:** MELBOURNE, FL 32935

**Title:** VP  
**Name:** EICKMANN, ROBERT  
**Address:** 379 CYPRESS POINT DRIVE  
**City-St-Zip:** MELBOURNE, FL 32940

**Title:** CFO  
**Name:** MCBRIDE, CLAIRE S  
**Address:** 412 PORT ROYAL BLVD  
**City-St-Zip:** SATELLITE BEACH, FL 32937

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:** C. SUZANNE MCBRIDE

CFO

01/04/2011

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