

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000072242

**FILED**  
**May 01, 2011**  
**Secretary of State**

**Entity Name:** INTERNATIONAL ALTERNATIVE ASSOCIATES, LLC

**Current Principal Place of Business:**

5751 ARVINE CIRCLE  
FT. MYERS, FL 33919 US

**New Principal Place of Business:**

**Current Mailing Address:**

5751 ARVINE CIRCLE  
FT. MYERS, FL 33919

**New Mailing Address:**

58 SAYBROOK ROAD  
ESSEX, CT 06426 41

**FEI Number:** 08-1440482

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACKSON, CATHERINE M  
5751 ARVINE CIRCLE  
FT. MYERS, FL 33919 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: MGR  
Name: JACKSON, CATHERINE M  
Address: 5751 ARVINE CIRCLE  
City-St-Zip: FORT MYERS, FL 33919 US

Title: MGR  
Name: JACKSON, CATHERINE  
Address: 33-68 191 STREET  
City-St-Zip: FLUSHING, FL 11358 41

Title: MGR  
Name: JACKSON, CATHERINE  
Address: 58 SAYBROOK ROAD  
City-St-Zip: ESSEX, CT 06426

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: CATHERINE JACKSON

MGR

05/01/2011

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