

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000110422

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** TIFFANY L. GORMAN, CPA, LLC

**Current Principal Place of Business:**

11509 LEON GRANDE COVE  
AUSTIN, TX 78759

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 201616  
AUSTIN, TX 78720

**New Mailing Address:**

**FEI Number:** 20-3849117

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GORMAN, TIFFANY L  
2345 WEST BAYSHORE ROAD  
GULF BREEZE, FL 32563 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: GORMAN, TIFFANY L  
Address: 11509 LEON GRANDE COVE  
City-St-Zip: AUSTIN, TX 78759

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: TIFFANY L. GORMAN

MGRM

04/18/2011

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