

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000114913

Entity Name: LOOSE CABOOSE LLC

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

**Current Principal Place of Business:**

2720 N HARBOR CITY BLVD.  
STE. A  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

2720 N HARBOR CITY BLVD.  
STE. A  
MELBOURNE, FL 32935

**New Mailing Address:**

FEI Number: 68-0617681

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MORGAN, DAVID H  
3813 STREAM DR.  
MELBOURNE, FL 32940 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: MORGAN, DAVID H  
Address: 3813 STREAM DR.  
City-St-Zip: MELBOURNE, FL 32940

Title: MGRM  
Name: MORGAN, YENA M  
Address: 3813 STREAM DR  
City-St-Zip: MELBOURNE, FL 32940

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: YENA M MORGAN

MGRM

04/01/2011

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