

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000121032

Entity Name: 949 CLINT MOORE, LLC

**FILED**  
**May 23, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

949 CLINT MOORE ROAD  
BOCA RATON, FL 33431

**New Principal Place of Business:**

**Current Mailing Address:**

949 CLINT MOORE ROAD  
BOCA RATON, FL 33431

**New Mailing Address:**

9390 NW 33RD MANOR  
C/O CHRIS TRUJILLO  
SUNRISE, FL 33351

FEI Number: 20-4115325

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LICHTMAN, JONATHAN J P.A.  
20283 STATE RD. 7  
SUITE 300  
BOCA RATON, FL 33498 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: TRUJILLO, CRESENCIO M JR.  
Address: 949 CLINT MOORE ROAD  
City-St-Zip: BOCA RATON, FL 33431

Title: MGR  
Name: ACEVEDO, RODOLFO C  
Address: 949 CLINT MOORE ROAD  
City-St-Zip: BOCA RATON, FL 33431

Title: MGR  
Name: MYOTT, STEVEN E  
Address: 949 CLINT MOORE ROAD  
City-St-Zip: BOCA RATON, FL 33431

Title: MGR  
Name: WILLIAMS, JAMES R  
Address: 949 CLINT MOORE ROAD  
City-St-Zip: BOCA RATON, FL 33431

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.M. TRUJILLO JR.

MGR

05/23/2011

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