

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000007076

Entity Name: TOM MALONE LLC

**FILED**  
**Mar 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

12721 SUNSHINE LANE #4  
TREASURE ISLAND, FL 33706

**New Principal Place of Business:**

**Current Mailing Address:**

12721 SUNSHINE LANE #4  
TREASURE ISLAND, FL 33706

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

MALONE, TOM  
12721 SUNSHINE LANE #4  
TREASURE ISLAND, FL 33706 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: MALONE, TOM  
Address: 12721 SUNSHINE LANE #4  
City-St-Zip: TREASURE ISLAND, FL 33706

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: TOM MALONE

MGR

03/09/2012

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