

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000025126

**FILED**  
**Jan 20, 2012**  
**Secretary of State**

**Entity Name:** MATTRESS RETAIL OUTLETS, LLC

**Current Principal Place of Business:**

8930 N. DAVIS HWY  
PENSACOLA, FL 32514 US

**New Principal Place of Business:**

**Current Mailing Address:**

8930 N. DAVIS HWY  
PENSACOLA, FL 32514 US

**New Mailing Address:**

**FEI Number:** 20-4461157

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CONNER, THOMAS D  
1114 WAVERLY WAY  
TALLAHASSEE, FL 32312 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:** CEO  
**Name:** CONNER, MIKE T  
**Address:** 1867 WAREHAM WAY  
**City-St-Zip:** CANTONMENT, FL 32533 US

**Title:** MGRM  
**Name:** CONNER, STEVEN W  
**Address:** 1020 MERRITT DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32301 US

**Title:** CFO  
**Name:** CONNER, THOMAS D  
**Address:** 1114 WAVERLY RD  
**City-St-Zip:** TALLAHASSEE, FL 32312 US

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:** MIKE CONNER

CEO

01/20/2012

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