

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000049399

Entity Name: MELISSA LYNN, LLC

**FILED**  
**Mar 25, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1300 MAIN STREET  
FT. MYERS BEACH, FL 33931

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6189  
FT. MYERS BEACH, FL 33932

**New Mailing Address:**

FEI Number: 20-4892716

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GALA, GEORGE  
7227 HENDRY CREEK DRIVE  
FORT MYERS, FL 33908 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: HENDERSON, DENNIS  
Address: 21251 CARTER ROAD  
City-St-Zip: ESTERO, FL 33928

Title: MGR  
Name: GALA, GEORGE  
Address: 7227 HENDRY CREEK DRIVE  
City-St-Zip: FT. MYERS, FL 33908

Title: SD  
Name: GALA, CHRISTINE  
Address: 7227 HENDRY CREEK DRIVE  
City-St-Zip: FORT MYERS, FL 33908

Title: TD  
Name: HENDERSON, RANELL  
Address: 21251 CARTER ROAD  
City-St-Zip: ESTERO, FL 33928

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: CHRISTINE GALA

SD

03/25/2010

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