

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000067724

Entity Name: EBM, LLC

**FILED**  
**Jun 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2463 PROVIDENCE STREET  
FORT MYERS, FL 33916

**New Principal Place of Business:**

2643 PROVIDENCE STREET  
FORT MYERS, FL 33916

**Current Mailing Address:**

2463 PROVIDENCE STREET  
FORT MYERS, FL 33916

**New Mailing Address:**

2643 PROVIDENCE STREET  
FORT MYERS, FL 33916

FEI Number: 20-8667771

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MURPHY, BENJAMIN  
2463 PROVIDENCE STREET  
FORT MYERS, FL 33916 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: MURPHY, BENJAMIN  
Address: 2463 PROVIDENCE STREET  
City-St-Zip: FORT MYERS, FL 33916

Title: MGRM  
Name: MURPHY, VINCENT  
Address: 2463 PROVIDENCE STREET  
City-St-Zip: FORT MYERS, FL 33916

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: BENJAMIN MURPHY

MGRM

06/15/2011

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