

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000070461

Entity Name: FAMILIA TUTELARY, LLC

FILED  
Apr 30, 2007  
Secretary of State

**Current Principal Place of Business:**

712 SOUTH OREGON AVENUE  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 18341  
TAMPA, FL 33679

**New Mailing Address:**

FEI Number: 20-5225459

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAREY, MICHAEL R  
712 SOUTH OREGON AVENUE  
TAMPA, FL 33606 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: M ( ) Change (X) Addition  
Name: M CONSULTING OF TAMP, A, INC.  
Address: P.O. BOX 18341  
City-St-Zip: TAMPA, FL 33679

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JOHN STANTON

M

04/30/2007

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