

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000078914

FILED
Apr 28, 2011
Secretary of State

Entity Name: IMAGINE - SARASOTA COUNTY, LLC

Current Principal Place of Business:

3250 MARY STREET, SUITE 202
COCONUT GROVE, FL 33133

New Principal Place of Business:

13790 N.W. 4TH STREET
SUITE 108
SUNRISE, FL 33325

Current Mailing Address:

3250 MARY STREET, SUITE 202
COCONUT GROVE, FL 33133

New Mailing Address:

13790 N.W. 4TH STREET
SUITE 108
SUNRISE, FL 33325

FEI Number: 26-0472274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: MCKEATHON, BARBARA
Address: 13790 N.W. 4TH STREET, SUITE 108
City-St-Zip: SUNRISE, FL 33325

Title: MGR
Name: VANDERHYDE, BOB
Address: 13790 N.W. 4TH STREET, SUITE 108
City-St-Zip: SUNRISE, FL 33325

Title: MGR
Name: HARDIN, MARK
Address: 13790 N.W. 4TH STREET, SUITE 108
City-St-Zip: SUNRISE, FL 33325

Title: MGR
Name: HUDEK, STEVE
Address: 13790 N.W. 4TH STREET, SUITE 108
City-St-Zip: SUNRISE, FL 33325

Title: MGR
Name: GAROFALO, DAVID
Address: 13790 N.W. 4TH STREET, SUITE 108
City-St-Zip: SUNRISE, FL 33325

Title: MGR
Name: HUGHES, JASON
Address: 13790 N.W. 4TH STREET, SUITE 108
City-St-Zip: SUNRISE, FL 33325

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: BARBARA MCKEATHON

MGR

04/28/2011

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