

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000083636

**FILED**  
**Apr 19, 2011**  
**Secretary of State**

**Entity Name:** SEPTEMBER HOUSE, LLC

**Current Principal Place of Business:**

DAVINA H. GAVEL  
16219 SEPTEMBER DR.  
LUTZ, FL 33549

**New Principal Place of Business:**

**Current Mailing Address:**

DAVINA H. GAVEL  
16219 SEPTEMBER DR.  
LUTZ, FL 33549

**New Mailing Address:**

**FEI Number:** 33-1142389

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GAVEL, ALAN A  
2002 N. LOIS AVENUE  
SUITE 260  
TAMPA, FL 33607 US

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

GAVEL, ALAN A  
2202 N. WEST SHORE BLVD  
SUITE 200  
TAMPA, FL 33558 US

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: ALAN A. GAVEL

04/19/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GAVEL, DAVINA H  
Address: 16219 SEPTEMBER DRIVE  
City-St-Zip: LUTZ, FL 33549

Title: MGRM  
Name: GAVEL, ALAN A  
Address: 2202 N. WEST SHORE BLVD, SUITE 200  
City-St-Zip: TAMPA, FL 33558

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: DAVINA GAVEL

MGRM

04/19/2011

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