

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000084629

FILED  
Mar 28, 2011  
Secretary of State

Entity Name: TURNPIKE TEN, LLC

**Current Principal Place of Business:**

1791 BLOUNT ROAD BAY 812  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

1791 BLOUNT ROAD BAY 812  
POMPANO BEACH, FL 33069

**New Mailing Address:**

FEI Number: 26-0888391

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHENDELL & ASSOCIATES, P.A.  
3650 NORTH FEDERAL HIGHWAY  
SUITE 202  
LIGHTHOUSE POINT, FL 33064 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: MUCCIACCIARO, DOMENIC  
Address: 1791 BLOUNT ROAD BAY 812  
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM  
Name: SALVO, PAOLO  
Address: 1791 BLOUNT ROAD BAY 812  
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM  
Name: BRIDIG FILLINGAME  
Address: 1791 BLOUNT ROAD BAY 812  
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM  
Name: SULLIVAN, LAWRENCE K  
Address: 1791 BLOUNT ROAD BAY 812  
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM  
Name: PERREAULT, THOMAS P  
Address: 1791 BLOUNT ROAD BAY 812  
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM  
Name: LOBIONDO, GERALD  
Address: 1791 BLOUNT ROAD BAY 812  
City-St-Zip: POMPANO BEACH, FL 33069

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: DOMINIC MUCCIACCIARO

MGRM

03/28/2011

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