

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000086886

FILED  
Feb 24, 2011  
Secretary of State

**Entity Name:** CIBU OFFICE SUPPLY, LLC

**Current Principal Place of Business:**

406 CANAL STREET  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

406 CANAL STREET  
NEW SMYRNA BEACH, FL 32168

**New Mailing Address:**

FEI Number: 11-3789091

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ELLWANGER, PATRICIA L  
4649 GOLDEN APPLES TRL  
PORT ORANGE, FL 32129 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: ELLWANGER, RICHARD C  
Address: 4649 GOLDEN APPLES TRAIL  
City-St-Zip: PORT ORANGE, FL 32129

Title: MGRM  
Name: ELLWANGER, PATRICIA L  
Address: 4649 GOLDEN APPLES TRAIL  
City-St-Zip: PORT ORANGE, FL 32129

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: PATRICIA L. ELLWANGER

MRS

02/24/2011

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