

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000097035

**FILED**  
**Feb 10, 2010**  
**Secretary of State**

**Entity Name:** LITTLE ANGELS ADOPTION AGENCY, LLC

**Current Principal Place of Business:**

108 NORTH RIDGEWOOD DRIVE  
SEBRING, FL 33870

**New Principal Place of Business:**

**Current Mailing Address:**

108 NORTH RIDGEWOOD DRIVE  
SEBRING, FL 33870

**New Mailing Address:**

**FEI Number:** 59-3688366

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SHANNON MCCracken  
1494 WILDE STREET  
AVON PARK,, FL 33825 US

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

MCCRACKEN, SHANNON B  
1494 WILDE STREET  
AVON PARK,, FL 33825 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: SHANNON MCCracken

02/10/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: DIR/  
Name: MCCracken, SHANNON  
Address: 108 NORTH RIDGEWOOD DRIVE  
City-St-Zip: SEBRING, FL 33870

Title: V P  
Name: MCCracken, MICHAEL C  
Address: 1494 WILDE STREET  
City-St-Zip: AVON PARK, FL 33825

Title: SRVP  
Name: PREWITT, CYNTHIA  
Address: 620 NE 118TH AVE. RD  
City-St-Zip: SILVER SPRINGS, FL 34488

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: SHANNON MCCracken

DIR

02/10/2010

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