

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000106062

**Entity Name:** BLACK TIP MASONRY, LLC

**FILED**  
**Feb 19, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2357 OKLAHOMA STREET  
WEST PALM BEACH, FL 33406 US

**New Principal Place of Business:**

**Current Mailing Address:**

2357 OKLAHOMA STREET  
WEST PALM BEACH, FL 33406 US

**New Mailing Address:**

**FEI Number:** 20-8166676

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FARINACCI, GLENN R  
2275 S. FEDERAL HWY, SUITE 130  
DELRAY BEACH, FL 33483 US

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

ALL FLORIDA FIRM, INC.  
813 DELTONA BLVD.  
STE. A  
DELTONA, FL 32725 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: ALISA BENWAY FOR ALL FLORIDA FIRM, INC.

02/19/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: EATON 4TH, CHARLES R  
Address: 2357 OKLAHOMA STREET  
City-St-Zip: WEST PALM BEACH, FL 33406

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: CHARLES R EATON

MGRM

02/19/2010

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