

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000005350

**FILED**  
**Apr 08, 2011**  
**Secretary of State**

**Entity Name:** LAW OFFICES OF MCCARTY & BOTTEX, PLLC

**Current Principal Place of Business:**

550 NORTH BUMBY AVENUE, SUITE 145  
ORLANDO, FL 32803

**New Principal Place of Business:**

1516 E. HILLCREST STREET  
107  
ORLANDO, FL 32803

**Current Mailing Address:**

550 NORTH BUMBY AVENUE, SUITE 145  
ORLANDO, FL 32803

**New Mailing Address:**

1516 E. HILLCREST STREET  
107  
ORLANDO, FL 32803

**FEI Number:** 20-8346024

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOTTEX, MICHELLE  
550 NORTH BUMBY AVENUE, SUITE 145  
ORLANDO, FL 32803 US

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

BOTTEX, MICHELLE  
1516 E. HILLCREST ST., SUITE 107  
ORLANDO, FL 32803 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: \_\_\_\_\_

04/08/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BOTTEX, MICHELLE  
Address: 1516 E. HILLCREST ST., STE. 107  
City-St-Zip: ORLANDO, FL 32803

Title: MGRM  
Name: MCCARTY, DANYELLE  
Address: 1516 E. HILLCREST ST., STE. 107  
City-St-Zip: ORLANDO, FL 32803

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: MICHELLE BOTTEX

MGRM

04/08/2011

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