

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000008543

**FILED**  
**Aug 29, 2010**  
**Secretary of State**

**Entity Name:** INTERNATIONAL REFERRAL NETWORK, LLC

**Current Principal Place of Business:**

4632 VINCENNES BLVD  
SUITE 104  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

4632 VINCENNES BLVD  
SUITE 201A  
CAPE CORAL, FL 33904 US

**Current Mailing Address:**

PO BOX 100689  
CAPE CORAL, FL 33910 US

**New Mailing Address:**

**FEI Number:** 26-1806748      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

HARTLEB, ASTRID P  
4632 VINCENNES BLVD  
SUITE 201A  
CAPE CORAL, FL 33904 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:** MGR  
**Name:** HARTLEB, ASTRID P  
**Address:** 4632 VINCENNES BLVD, SUITE 201A  
**City-St-Zip:** CAPE CORAL, FL 33904 US

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: ASTRID P HARTLEB

MGR

08/29/2010

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