

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000010644

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** 4301 HAINES ROAD NORTH, LLC

**Current Principal Place of Business:**

4301 HAINES RD. NORTH  
ST. PETERSBURG, FL 33714

**New Principal Place of Business:**

**Current Mailing Address:**

4301 HAINES RD. NORTH  
ST. PETERSBURG, FL 33714

**New Mailing Address:**

**FEI Number:** 59-3710757

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FULLER, STEVE  
4301 HAINES RD  
ST PETERSBURG, FL 33714 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: FULLER, STEVE  
Address: 4301 HAINES RD  
City-St-Zip: ST PETERSBURG, FL 33714

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: STEVE FULLER

PRES

04/18/2011

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