

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000028424

**FILED**  
**Feb 10, 2011**  
**Secretary of State**

**Entity Name:** SHAD PIPES, LLC

**Current Principal Place of Business:**

2293 ESTATE CIRCLE  
NAVARRE, FL 32566 US

**New Principal Place of Business:**

19 PEBBLE BEACH DRIVE  
SHALIMAR, FL 32579 US

**Current Mailing Address:**

2293 ESTATE CIRCLE  
NAVARRE, FL 32566 US

**New Mailing Address:**

7902 B MELROSE  
CLOVIS, NM 88101 US

**FEI Number:** 64-0953346

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEININGER LAW FIRM, P.A.  
114 PALMETTO STREET  
SUITE 8  
DESTIN, FL 32541 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:** PIPES, SHAD  
**Address:** 2293 ESTATE CIRCLE  
**City-St-Zip:** NAVARRE, FL 32566 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:** SHAD PIPES

MGRM

02/10/2011

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