

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000029545

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Entity Name:** INTREPID 5, LLC

**Current Principal Place of Business:**

3059 GRAND AVE., STE 440  
COCONUT GROVE, FL 33133 US

**New Principal Place of Business:**

**Current Mailing Address:**

3059 GRAND AVE., STE 440  
COCONUT GROVE, FL 33133 US

**New Mailing Address:**

3059 GRAND AVE.  
440  
COCONUT GROVE, FL 33133 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

ATRIUM REGISTERED AGENTS, INC.  
1500 SAN REMO AVENUE, SUITE 125  
CORAL GABLES, FL 33146 US

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

LAWRENCE, BEAME  
3059 GRAND AVENUE  
440  
COCONUT GROVE, FL 33133 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: LAWRENCE BEAME

02/21/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR.  
Name: BEAME, LAWRENCE  
Address: 3059 GRAND AVE., STE 440  
City-St-Zip: COCONUT GROVE, FL 33133 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: LAWRENCE BEAME

MGR

02/21/2011

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