

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000030689

**FILED**  
**Apr 24, 2011**  
**Secretary of State**

**Entity Name:** WALLACE BROTHERS,LLC

**Current Principal Place of Business:**

707 SUNBURST COVE LANE  
WINTERGARDEN, FL 34787

**New Principal Place of Business:**

**Current Mailing Address:**

707 SUNBURST COVE LANE  
WINTERGARDEN, FL 34787

**New Mailing Address:**

**FEI Number:** 22-3956085

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSEMOND, TELEMAQUE  
707 SUNBURST COVE LANE  
WINTERGARDEN, FL 34787 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:** WALLACE, DAVIDSON  
**Address:** 707 SUNBURST COVE LANE  
**City-St-Zip:** WINTERGARDEN, FL 34787

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:** DAVIDSON WALLACE

MGR

04/24/2011

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