

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000062432

**Entity Name:** MARY L. (MIMI) ADAMS, LLC

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

**Current Principal Place of Business:**

10550 BAYMEADOWS ROAD  
UNIT 1021  
JACKSONVILLE, FL 32256 US

**New Principal Place of Business:**

10550 BAYMEADOWS ROAD  
UNIT 1021  
JACKSONVILLE, FL 32256 US

**Current Mailing Address:**

**New Mailing Address:**

**FEI Number:**  **FEI Number Applied For ( )**  **FEI Number Not Applicable (X)**  **Certificate of Status Desired ( )**

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

ADAMS, MARY L  
10550 BAYMEADOWS ROAD  
UNIT 1021  
JACKSONVILLE, FL 32256 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: MGMR  
Name: ADAMS, MARY L  
Address: 10550 BAYMEADOWS ROAD, UNIT 1021  
City-St-Zip: JACKSONVILLE, FL 32256 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: MARY L. (MIMI) ADAMS

MGMR

04/21/2011

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