

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000069499

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

**Entity Name:** CJ'S PROFESSIONAL PET SITTING SERVICE, LLC

**Current Principal Place of Business:**

16204 MUIRFIELD DRIVE  
ODESSA, FL 33556

**New Principal Place of Business:**

**Current Mailing Address:**

16204 MUIRFIELD DRIVE  
ODESSA, FL 33556

**New Mailing Address:**

**FEI Number:** 26-0515354

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LASMAN, JEFFREY M ESQ.  
C/O LASMAN LAW FIRM, P.A.  
6152 DELANCEY STATION STREET, SUITE 205  
RIVERVIEW, FL 33569 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:** DEAN, MARTIN M  
**Address:** 16204 MUIRFIELD DRIVE  
**City-St-Zip:** ODESSA, FL 33556

**Title:** MGRM  
**Name:** DEAN, CATHY J  
**Address:** 16204 MUIRFIELD DRIVE  
**City-St-Zip:** ODESSA, FL 33556

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:** MARTIN DEAN

MGRM

04/24/2011

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