

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000101315

**FILED**  
**Mar 30, 2011**  
**Secretary of State**

**Entity Name:** WALSTIB PARTNERS, LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

2101 45TH STREET  
SUITE 108  
VERO BEACH, FL 32967

**New Principal Place of Business:**

**Current Mailing Address:**

12 TARPON DRIVE  
VERO BEACH, FL 32960

**New Mailing Address:**

**FEI Number:** 26-1355175

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NORMAN, BRADFORD  
12 TARPON DRIVE  
VERO BEACH, FL 32960 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: NORMAN, BRADFORD IV  
Address: 12 TARPON DRIVE  
City-St-Zip: VERO BEACH, FL 32960

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: BRAD NORMAN

MGRM

03/30/2011

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