

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000102087

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

**Entity Name:** LAW OFFICE OF MICHELE L. LIEBERMAN, LLC.

**Current Principal Place of Business:**

2805 HWY 44 WEST  
INVERNESS, FL 34453

**New Principal Place of Business:**

5618 N. LECANTO HWY.  
BEVERLY HILLS, FL 34465

**Current Mailing Address:**

2805 HWY 44 WEST  
INVERNESS, FL 34453

**New Mailing Address:**

PO BOX 544  
INVERNESS, FL 34451

**FEI Number:** 14-2010402

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LIEBERMAN, MICHELE L  
2805 HWY 44 WEST  
INVERNESS, FL 34453 US

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

LIEBERMAN, MICHELE L  
5618 N. LECANTO HWY.  
BEVERLY HILLS, FL 34465 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:

04/30/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LIEBERMAN, MICHELE L  
Address: 5618 N. LECANTO HWY.  
City-St-Zip: BEVERLY HILLS, FL 34465

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: MICHELE L LIEBERMAN

MGRM

04/30/2011

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