

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000109394

**FILED**  
**Apr 05, 2011**  
**Secretary of State**

**Entity Name:** MAXTER ENTERPRISES LLC

**Current Principal Place of Business:**

6843 NARCOOSSEE RD  
UNIT 72  
ORLANDO, FL 32822

**New Principal Place of Business:**

**Current Mailing Address:**

6843 NARCOOSSEE RD  
UNIT 72  
ORLANDO, FL 32822

**New Mailing Address:**

**FEI Number:** 26-1296740      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

MATARAZZO, NICK  
1551 CATERPILLAR ST  
ST. CLOUD, FL 34771      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:** MATARAZZO, NICK  
**Address:** 1551 CATERPILLAR ST  
**City-St-Zip:** ST. CLOUD, FL 34771

**Title:** MGRM  
**Name:** BAXTER, MICHELLE  
**Address:** 1551 CATERPILLAR ST  
**City-St-Zip:** ST. CLOUD, FL 34771

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:** NICK MATARAZZO

MGRM

04/05/2011

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