

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000112456

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Entity Name:** PRICELESS MEMORIES, LLC

**Current Principal Place of Business:**

2330 NORTHUMBRIA DRIVE  
SANFORD, FL 32771 US

**New Principal Place of Business:**

**Current Mailing Address:**

2330 NORTHUMBRIA DRIVE  
SANFORD, FL 32771 US

**New Mailing Address:**

**FEI Number:** 41-2257461

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BRENDA BRAY, CPA, LLC  
115 E. GRANADA BLVD.  
STE. 4  
ORMOND BEACH, FL 32176 US

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

BRENDA BRAY  
115 E. GRANADA BLVD.  
STE. 4  
ORMOND BEACH, FL 32176 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:** BRENDA BRAY

01/04/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** MELLINGER, BARBARA L  
**Address:** 2330 NORTHUMBRIA DRIVE  
**City-St-Zip:** SANFORD, FL 32771 US

**Title:** MGRM  
**Name:** MCVEY, GINA  
**Address:** 2330 NORTHUMBRIA DRIVE  
**City-St-Zip:** SANFORD, FL 32771 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:** GINA MCVEY

MGRM

01/04/2011

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