

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000119702

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** IMAGESFX POST, LLC

**Current Principal Place of Business:**

3411 W. CRIGGER CT.  
LECANTO, FL 34461 US

**New Principal Place of Business:**

97 ANTON COURT  
HOMOSASSA, FL 34446 US

**Current Mailing Address:**

3411 W. CRIGGER CT.  
LECANTO, FL 34461 US

**New Mailing Address:**

97 ANTON COURT  
HOMOSASSA, FL 34446 US

**FEI Number:** 26-1522474

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AZZARELLI, JOSEPH R  
97 ANTON COURT  
HOMOSASSA, FL 34446 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:** AZZARELLI, JOSEPH R  
**Address:** 97 ANTON COURT  
**City-St-Zip:** HOMOSASSA, FL 34446 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:** JOSEPH R. AZZARELLI

MGRM

02/16/2011

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