

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000125971

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Entity Name:** NEIGHBOR, L.L.C.

**Current Principal Place of Business:**

529 S INDUSTRY RD  
COCOA, FL 32926

**New Principal Place of Business:**

**Current Mailing Address:**

DAVID GRAHAM  
505 WILSON ROAD  
ANNAPOLIS, MD 21401

**New Mailing Address:**

**FEI Number:** 14-2013927      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

MINOT, MICHAEL S  
319 RIVEREDGE BLVD., SUITE 218  
COCOA, FL 32922 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:** GRAHAM, DAVID  
**Address:** 505 WILSON ROAD  
**City-St-Zip:** ANNAPOLIS, MD 21401

**Title:** MGRM  
**Name:** WAGNER, KENNETH R  
**Address:** 205 MT. OAK PLACE  
**City-St-Zip:** ANNAPOLIS, MD 21401

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:** DAVID B GRAHAM

MM

01/05/2010

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