

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000001689

FILED
Apr 28, 2011
Secretary of State

Entity Name: TIGER ENCOUNTER AND REHABILITATION SANCTUARY, LLC

Current Principal Place of Business:

3465 MAEBERT ROAD
MIMS, FL 32754

New Principal Place of Business:

Current Mailing Address:

3495 MAEBERT ROAD
MIMS, FL 32754

New Mailing Address:

FEI Number: 26-2953181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOELKE, JOHN W
3495 MAEBERT ROAD
MIMS, FL 32754 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: LECLAIR, BRIAN
Address: 3465 MAEBERT ROAD
City-St-Zip: MIMS, FL 32754

Title: MGRM
Name: EUBANK, MICHAEL J
Address: 6760 STILL POINT DRIVE
City-St-Zip: MELBOURNE, FL 32940

Title: MGR
Name: BOELKE, JOHN W
Address: 3495 MAEBERT ROAD
City-St-Zip: MIMS, FL 32754

Title: MGR
Name: BENNETT, SUSAN
Address: 5001 ANACONDA AVE
City-St-Zip: COCOA, FL 32926

Title: MGR
Name: LECLAIR, SHARON
Address: 3465 MAEBERT ROAD
City-St-Zip: MIMS, FL 32754

Title: MGRM
Name: BOELKEBARNETT, JAMES
Address: 3050 CHEROKEE ROAD
City-St-Zip: SAINT CLOUD, FL 34772

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: JOHN W. BOELKE

MGR

04/28/2011

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