

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000015282

**FILED**  
**Jan 09, 2010**  
**Secretary of State**

**Entity Name:** INDEPENDENCE BOULEVARD, LLC

**Current Principal Place of Business:**

17515 DEER ISLAND ROAD  
TAVARES, FL 32778

**New Principal Place of Business:**

**Current Mailing Address:**

17515 DEER ISLAND ROAD  
TAVARES, FL 32778

**New Mailing Address:**

**FEI Number:** 26-1953651

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRYANT, CARLA DELOACH  
1206 EAST RIDGEWOOD STREET  
ORLANDO, FL 32803 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:** MGR  
**Name:** ACKERBLOOM, THURSTON R  
**Address:** 17515 DEER ISLAND RD  
**City-St-Zip:** DEER ISLAND, FL 32778

**Title:** MEMB  
**Name:** ACKERBLOOM, MARILINA  
**Address:** 17515 DEER ISLAND RD  
**City-St-Zip:** DEER ISLAND, FL 32778

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:** THURSTON R. ACKERBLOOM, JR

MGR

01/09/2010

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