

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000033130

Entity Name: A & N ON ROUTE LLC

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

9020 SE FARM ROAD  
LEE, FL 32059

**New Principal Place of Business:**

268 NE HEARTSEASE WAY  
LEE, FL 32059

**Current Mailing Address:**

9020 SE FARM ROAD  
LEE, FL 32059

**New Mailing Address:**

268 NE HEARTSEASE WAY  
LEE, FL 32059

FEI Number: 26-2310209

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CHACON, NILO  
9020 SE FARM ROAD  
LEE, FL 32059 US

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

CHACON, NILO  
268 NE HEARTSEASE WAY  
LEE, FL 32059 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:

04/12/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: NILO, CHACON  
Address: 268 NE HEARTSEASE WAY  
City-St-Zip: LEE, FL 32059

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: NILO CHACON

MGRM

04/12/2011

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