

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000042465

Entity Name: SFMB, LLC

**FILED**  
**Mar 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

406 SOUTH HOWARD AVENUE  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

406 SOUTH HOWARD AVENUE  
TAMPA, FL 33606

**New Mailing Address:**

FEI Number: 26-2522270

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

O'CONNOR, BARRY  
405 SOUTH HOWARD AVENUE  
TAMPA, FL 33606 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: O'CONNOR, BARRY  
Address: 406 SOUTH HOWARD AVENUE  
City-St-Zip: TAMPA, FL 33606

Title: P  
Name: JAMES, JOHN SEAN  
Address: 5 STONE HAVEN ROAD  
City-St-Zip: WEST NYACK, NY 10994

Title: MGRM  
Name: WINTERS, MARCUS  
Address: 406 S HOWARD AVE  
City-St-Zip: TAMPA, FL 33606

Title: MGRM  
Name: JAMES, FINBARR  
Address: 406 S HOWARD AVE  
City-St-Zip: TAMPA, FL 33606

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: BARRY O'CONNOR

MGR

03/30/2010

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