

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000051873

FILED  
Feb 17, 2011  
Secretary of State

**Entity Name:** TRADITIONS MANAGEMENT OF ST LOUIS, LLC

**Current Principal Place of Business:**

1022 MAIN STREET  
SUITE H  
DUNEDIN, FL 34698 US

**New Principal Place of Business:**

24641 US HWY 19 N  
CLEARWATER, FL 33763 US

**Current Mailing Address:**

1022 MAIN STREET  
SUITE H  
DUNEDIN, FL 34698 US

**New Mailing Address:**

24641 US HWY 19 N  
CLEARWATER, FL 33763 US

**FEI Number:** 26-2926408

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SEDA, JOSE  
1022 MAIN STREET  
SUITE H  
DUNEDIN, FL 34698 US

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

HARTIG, MARK  
24641 US HWY 19 N.  
CLEARWATER, FL 33763 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: MARK HARTIG

02/17/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ATKINS, BEN  
Address: 24641 US HWY 19 N  
City-St-Zip: CLEARWATER, FL 33763 US

Title: MGRM  
Name: MORRISON, MARYA  
Address: 24641 US HWY 19 N  
City-St-Zip: CLEARWATER, FL 33763 US

Title: MGRM  
Name: GARFF, JOSEPH  
Address: 24641 US HWY 19 N  
City-St-Zip: CLEARWATER, FL 33763 US

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: BEN ATKINS

MGRM

02/17/2011

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