

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000059377

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** ZITO, LLC

**Current Principal Place of Business:**

630 HWY 17/92 WEST  
HAINES CITY, FL 33844

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1388  
HAINES CITY, FL 338451388

**New Mailing Address:**

**FEI Number:** 26-2858345

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAMMONS, ROBERT O  
1556 SIXTH STREET SE  
WINTER HAVEN, FL 338804509 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:** PRES  
**Name:** ZITO, DAN E  
**Address:** PO BOX 1388  
**City-St-Zip:** HAINES CITY, FL 33845

**Title:** SECR  
**Name:** ZITO, CONSTANCE B  
**Address:** PO BOX 1388  
**City-St-Zip:** HAINES CITY, FL 33845

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:** DAN E. ZITO

PRES

02/16/2011

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