

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000060993

Entity Name: MILLIE, LLC

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

315 DUNES AVENUE,  
APT 907  
NAPLES, FL 34110

**New Principal Place of Business:**

**Current Mailing Address:**

315 DUNES AVENUE,  
APT 907  
NAPLES, FL 34110

**New Mailing Address:**

FEI Number: 26-4217784

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

OSBORNE, LINDA S  
315 DUNES AVENUE,  
APT 907  
NAPLES, FL 34110 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: MGRM  
Name: OSBORNE, LINDA S CO-TTEE  
Address: 315 DUNES AVENUE, APT 907  
City-St-Zip: NAPLES, FL 34110

Title: MGRM  
Name: OSBORNE, HARRY A CO-TTEE  
Address: 315 DUNES AVENUE, APT 907  
City-St-Zip: NAPLES, FL 34110

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: LINDA S. OSBORNE

MGRM

01/04/2011

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