

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000061528

Entity Name: MARGIN OF ERROR, LLC

FILED  
Apr 15, 2011  
Secretary of State

## Current Principal Place of Business:

3391 S FLETCHER AVE  
FERNANDINA BEACH, FL 32034

## New Principal Place of Business:

## Current Mailing Address:

3391 S FLETCHER AVE  
FERNANDINA BEACH, FL 32034

## New Mailing Address:

FEI Number: 80-0201984

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BEATTIE, DAVID  
2877 PARK SQUARE PLACE  
FERNANDINA BEACH, FL 32034 US

## Name and Address of New Registered Agent:

BEATTIE, DAVID  
3391 SOUTH FLETCHER AVE.  
FERNANDINA BEACH, FL 32034 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:

04/15/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM  
Name: BEATTIE, DAVID  
Address: 2877 PARK SQUARE PLACE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM  
Name: BEATTIE, ROBIN  
Address: 2877 PARK SQUARE PLACE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM  
Name: DOOLEY, BRYAN  
Address: 95089 BUCKEYE COURT  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM  
Name: DOOLEY, DIA  
Address: 95089 BUCKEYE COURT  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: MGRM  
Name: RYNER, MARGARET  
Address: 1219 S FOREST DRIVE  
City-St-Zip: ARLINGTON, VA 22204

Title: MGRM  
Name: FERM, DENNIS  
Address: 1219 S FOREST DRIVE  
City-St-Zip: ARLINGTON, VA 22204

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: BRYAN DOOLEY

MGRM

04/15/2011

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