

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000062665

Entity Name: PMAM LLC

**FILED**  
**Jan 25, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

2 FLOWER COURT  
LAKESIDE PARK, KY 41017 US

**New Principal Place of Business:**

**Current Mailing Address:**

2 FLOWER COURT  
LAKESIDE PARK, KY 41017 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

FREY, PAUL  
5880 MIDNIGHT PASS RD.  
209  
SIESTA KEY, FL 34242 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: FREY, MELANIE  
Address: 2 FLOWER COURT  
City-St-Zip: LAKESIDE PARK, KY 41017 US

Title: MGRM  
Name: FREY, PAUL  
Address: 2 FLOWER COURT  
City-St-Zip: LAKESIDE PARK, KY 41017 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: PAUL FREY

MGRM

01/25/2010

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