

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000063656

Entity Name: EVEREST CONCEPTS LLC

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

**Current Principal Place of Business:**

14043 ZEPHERMOOR LANE  
WINTER GARDEN, FL 34787 US

**New Principal Place of Business:**

9640 BOGGY CREEK ROAD  
SUITE #5  
ORLANDO, FL 32824 US

**Current Mailing Address:**

14043 ZEPHERMOOR LANE  
WINTER GARDEN, FL 34787 US

**New Mailing Address:**

9640 BOGGY CREEK ROAD  
SUITE #5  
ORLANDO, FL 32824 US

FEI Number: 26-2892092

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

AGOSTO, MARISOL L  
14043 ZEPHERMOOR LANE  
WINTER GARDEN, FL 34787 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: POTTER, AVERY A  
Address: 5017 CITY ST. UNIT 1938  
City-St-Zip: ORLANDO, FL 32839

Title: MGRM  
Name: POTTER, NYDIA M  
Address: 50017 CITY ST UNIT 1938  
City-St-Zip: ORLANDO, FL 32839

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: AVERY A POTTER

MGRM

02/16/2011

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