

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000063788

Entity Name: WILLIE MAE'S PIES, LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

843 CYPRESS PARKWAY  
253  
KISSIMMEE, FL 34759

**New Principal Place of Business:**

**Current Mailing Address:**

843 CYPRESS PARKWAY  
253  
KISSIMMEE, FL 34759

**New Mailing Address:**

PO BOX 581329  
KISSIMMEE, FL 34758

FEI Number: 80-0213452

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BROWN, SOPHIA  
843 CYPRESS PARKWAY  
253  
KISSIMMEE, FL 34759 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: MGR  
Name: BROWN, SOPHIA  
Address: 843 CYPRESS PARKWAY #253  
City-St-Zip: KISSIMMEE, FL 34759

Title: MGR  
Name: BROWN, ROBERT  
Address: 843 CYPRESS PARKWAY #253  
City-St-Zip: KISSIMMEE, FL 34759

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: SOPHIA BROWN

MGR

04/30/2012

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