

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000082981

Entity Name: NOTES UNLIMITED, LLC

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

445 SANDERLING DR.  
INDIALANTIC, FL 32903

**New Principal Place of Business:**

**Current Mailing Address:**

445 SANDERLING DR.  
INDIALANTIC, FL 32903

**New Mailing Address:**

102 EAST NEW HAVEN AVENUE  
PMB # 138  
MELBOURNE, FL 32901

FEI Number: 27-0806612

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOX, CLINTONIA  
445 SANDERLING DRIVE  
INDIALANTIC, FL 32903 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: P  
Name: BOX, CLINTONIA  
Address: 445 SANDERLING DRIVE  
City-St-Zip: INDIALANTIC, FL 32903

Title: VP  
Name: BUSH, KAYE  
Address: 445 SANDERLING DRIVE  
City-St-Zip: INDIALANTIC, FL 32903 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: CLINTONIA BOX

MGR

04/11/2011

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