

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000004957

**Entity Name:** ALFIE'S GUN RANGE, LLC

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7080 W STATE ROAD 84  
SUITE 11  
DAVIE, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

7080 W STATE ROAD 84  
SUITE 11  
DAVIE, FL 33317

**New Mailing Address:**

**FEI Number:** 26-4046595

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DANNY SHUM CPA, P.L.  
7080 W STATE RD 84  
SUITE 11  
DAVIE, FL 33317 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:** CEO  
**Name:** FELICIANO, ALFRED  
**Address:** 7080 W STATE ROAD 84  
**City-St-Zip:** DAVIE, FL 33317 US

**Title:** MGRM  
**Name:** FELICIANO, CARMEN M  
**Address:** 7080 W STATE ROAD 84  
**City-St-Zip:** DAVIE, FL 33317

**Title:** MGRM  
**Name:** FELICIANO, ROBERT A  
**Address:** 7080 W STATE ROAD 84  
**City-St-Zip:** DAVIE, FL 33317 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: ALFRED FELICIANO

CEO

01/04/2011

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