

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000010073

FILED  
Jan 13, 2011  
Secretary of State

**Entity Name:** TIP 2 TOES, LLC

**Current Principal Place of Business:**

24929 NW 2ND AVE  
NEWBERRY, FL 32669

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 331  
NEWBERRY, FL 32669

**New Mailing Address:**

**FEI Number:** 26-4142712

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CUMMINGS, CAMIE  
4160 SE 53RD CT  
TRENTON, FL 32693 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: CUMMINGS, CAMIE  
Address: 4160 SE 53RD CT  
City-St-Zip: TRENTON, FL 32693

Title: MGRM  
Name: MICCICHE, MARIA  
Address: 4160 SE 53RD CT  
City-St-Zip: TRENTON, FL 32693

Title: SEC  
Name: SALISBURY, STACI  
Address: 3623 NW 298 ST  
City-St-Zip: NEWBERRY, FL 32669

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: MARIA MICCICHE

MGRM

01/13/2011

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