

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000019050

Entity Name: LO-RIDER MANAGEMENT, LLC

FILED  
Apr 30, 2011  
Secretary of State

**Current Principal Place of Business:**

888 SOUTH ANDREWS AVENUE  
SUITE 501  
FORT LAUDERDALE, FL 33316

**New Principal Place of Business:**

888 SE 3RD AVENUE  
SUITE 501  
FORT LAUDERDALE, FL 33316

**Current Mailing Address:**

PO BOX 292037  
DAVIE, FL 33329

**New Mailing Address:**

FEI Number: 26-4330657

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FORMAN, M. AUSTIN  
888 SOUTH ANDREWS AVENUE  
SUITE 501  
FORT LAUDERDALE, FL 333316 US

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

FORMAN, M. AUSTIN  
888 SE 3RD AVENUE  
SUITE 501  
FORT LAUDERDALE, FL 333316 US

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: M. AUSTIN FORMAN

04/30/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FORMAN, M. AUSTIN  
Address: 888 SE 3RD AVENUE #501  
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: MGRM  
Name: MARCELLINO, LORI J  
Address: 888 SE 3RD AVENUE #501  
City-St-Zip: FORT LAUDERDALE, FL 33316

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: M. AUSTIN FORMAN

MGR

04/30/2011

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