

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000031479

Entity Name: SWANKY I DO'SI, LLC

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

400 SUMMIT RIDGE PLACE  
UNIT 214  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

400 SUMMIT RIDGE PLACE  
UNIT 214  
LONGWOOD, FL 32779

**New Mailing Address:**

FEI Number: 26-4585090

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLEISHER, STEPHANIE M  
400 SUMMIT RIDGE PLACE  
UNIT 214  
LONGWOOD, FL 32779 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: FLEISHER, STEPHANIE M  
Address: 400-214 SUMMIT RIDGE PLACE  
City-St-Zip: LONGWOOD, FL 32779 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: STEPHANIE M FLEISHER

OWN

02/28/2011

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