

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000045918

Entity Name: FAMIGLIA HOLDINGS, LLC

**FILED**  
**Apr 09, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4819 KERRY FOREST PARKWAY  
TALLAHASSEE, FL 32309

**New Principal Place of Business:**

**Current Mailing Address:**

4819 KERRY FOREST PARKWAY  
TALLAHASSEE, FL 32309

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

KENNY, JOH C ESQ.  
241 EAST SIXTH AVENUE  
TALLAHASSEE, FL 32303 US

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

MANUELE, SALVATORE  
4819 KERRY FOREST PARKWAY  
TALLAHASSEE, FL 32309 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: SALVATORE MANUELE

04/09/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: CEO  
Name: MANUELE, SALVATORE  
Address: 4819 KERRY FOREST PARKWAY  
City-St-Zip: TALLAHASSEE, FL 32309

Title: MGRM  
Name: MANUELE, SALVATORE  
Address: 4819 KERRY FOREST PARKWAY  
City-St-Zip: TALLAHASSEE, FL 32309

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: SALVATORE MANUELE

CEO

04/09/2011

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