

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000054307

FILED  
Feb 09, 2011  
Secretary of State

Entity Name: THEE MUD STORE, LLC

**Current Principal Place of Business:**

250 AVE K SW  
STE 100  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

**Current Mailing Address:**

250 AVE K SW  
STE 100  
WINTER HAVEN, FL 33880

**New Mailing Address:**

FEI Number: 27-0303922      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CASSIDY, MICHELLE  
250 AVE K SW  
STE 100  
WINTER HAVEN, FL 33880 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: MGRM  
Name: RHINEHART, ADAM  
Address: 250 AVE K SW STE 100  
City-St-Zip: WINTER HAVEN, FL 33880 US

Title: MGRM  
Name: RHINEHART, ROBERT A  
Address: 250 AVE K SW STE 100  
City-St-Zip: WINTER HAVEN, FL 33880 US

Title: MGRM  
Name: RHINEHART, NICHOLAS  
Address: 250 AVE K SW STE 100  
City-St-Zip: WINTER HAVEN, FL 33880 US

Title: MGRM  
Name: CASSIDY, ALBERT S  
Address: 250 AVE K SW STE 100  
City-St-Zip: WINTER HAVEN, FL 33880 US

Title: MGRM  
Name: CASSIDY, MICHELLE  
Address: 250 AVE K SW STE 100  
City-St-Zip: WINTER HAVEN, FL 33880

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: MICHELLE CASSIDY      MGRM      02/09/2011

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