

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000083936

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** BIG BROTHERS BIG SISTERS OF ST. LUCIE, INDIAN RIVER AND OKEECHOBEE COUNTIES  
TRANSPORTATION, LLC

**Current Principal Place of Business:**

125 N. SECOND STREET  
FORT PIERCE, FL 34950

**New Principal Place of Business:**

**Current Mailing Address:**

125 N. SECOND STREET  
FORT PIERCE, FL 34950

**New Mailing Address:**

FEI Number: 59-2455513

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

MILLER, JUDI DR.  
125 N. SECOND STREET  
FORT PIERCE, FL 34950 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: CEO  
Name: MILLER, JUDI DR.  
Address: 125 N. SECOND STREET  
City-St-Zip: FORT PIERCE, FL 34950

Title: P  
Name: COKE, BETH  
Address: 317 S. 2ND STREET  
City-St-Zip: FORT PIERCE, FL 34950

Title: VP  
Name: GARCIA, BENNY  
Address: 125 N. 2ND STREET  
City-St-Zip: FORT PIERCE, FL 34950

Title: S  
Name: HIOTT, PAUL  
Address: 125 N. 2ND STREET  
City-St-Zip: FORT PIERCE, FL 34950

Title: T  
Name: HAMNER, JUDY  
Address: 6602 LAKE LAND BLVD  
City-St-Zip: FORT PIERCE, FL 34951

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: JUDI MILLER

CEO

01/05/2011

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