

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000096602

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** NEIGHBORHOOD BENEFITS LLC

**Current Principal Place of Business:**

2904 N ATLANTIC BLVD  
FT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

ATTN: THERESA H JOHNSON  
601 MAIN ST, STE 102  
HAZARD, KY 41701 US

**New Mailing Address:**

**FEI Number:** 27-1534382

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JORDAN, SCOTT J  
C/O TRIPP SCOTT PA  
110 SE 6TH ST, 15TH FLOOR  
FT LAUDERDALE, FL 33301 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:** JOHNSON, THERESA H  
**Address:** 601 MAIN ST, STE 102  
**City-St-Zip:** HAZARD, KY 41701 US

**Title:** MGR  
**Name:** GORMAN, L D  
**Address:** 2904 N ATLANTIC BLVD  
**City-St-Zip:** FT LAUDERDALE, FL 33308 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:** THERESA H JOHNSON

MGR

04/29/2011

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