

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000109958

Entity Name: JOSEPH CIARLA, LLC

**FILED**  
**Jan 07, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

2323 SAGINAW ROAD  
NORTH PORT, FL 34286

## **New Principal Place of Business:**

2563 N. TOLEDO BLADE BLVD  
3  
NORTH PORT, FL 34288

## **Current Mailing Address:**

2323 SAGINAW ROAD  
NORTH PORT, FL 34286

## **New Mailing Address:**

2563 N. TOLEDO BLADE BLVD  
3  
NORTH PORT, FL 34288

FEI Number: 20-4676155

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CIARLA, JOSEPH  
2323 SAGINAW ROAD  
NORTH PORT, FL 34286 US

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

CIARLA, JOSEPH  
2563 N. TOLEDO BLADE BLVD  
3  
NORTH PORT, FL 34288 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: JOSEPH CIARLA

01/07/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CIARLA, JOSEPH  
Address: 2323 SAGINAW ROAD  
City-St-Zip: NORTH PORT, FL 34286

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: JOSEPH CIARLA

CEO

01/07/2011

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