# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Mar 17, 2011**
**Secretary of State**

DOCUMENT# L09000120845

**Entity Name:** GATORBONES OF CENTRAL FLORIDA, LLC

**Current Principal Place of Business:**

1984 ALAQUA DRIVE
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

1984 ALAQUA DRIVE
LONGWOOD, FL 32779

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

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

REED, STEPHEN M
1984 ALAQUA DRIVE
LONGWOOD, FL 32779 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: REED, STEPHEN M
Address: 1984 ALAQUA DRIVE
City-St-Zip: LONGWOOD, FL 32779

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 Statues.

SIGNATURE: STEPHEN M. REED MGR 03/17/2011

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