

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000121226

Entity Name: TOBO, LLC

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

4900 SW 46TH CT. APT #1104  
OCALA, FL 34474

**New Principal Place of Business:**

4749 SW 41ST ST  
OCALA, FL 34474

**Current Mailing Address:**

P.O. BOX 5581  
OCALA, FL 34478 US

**New Mailing Address:**

4749 SW 41ST ST  
OCALA, FL 34474

FEI Number: 27-1529719

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GLASFORD, TODD A  
4900 SW 46TH CT. APT #1104  
OCALA, FL 34474 US

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

GLASFORD, TODD A  
4749 SW 41ST ST  
OCALA, FL 34474 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: TODD A. GLASFORD

04/11/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GLASFORD, TODD A  
Address: 4749 SW 41ST ST  
City-St-Zip: Ocala, FL 34474

Title: MGRM  
Name: GLASFORD, BONNIE J  
Address: 4749 SW 41ST ST  
City-St-Zip: Ocala, FL 34474

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: TODD A. GLASFORD

MGRM

04/11/2011

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