

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000010701

FILED  
Jan 09, 2011  
Secretary of State

**Entity Name:** FIXATION REMODEL AND RESTORATION LLC

**Current Principal Place of Business:**

1605 S. MAYFAIR RD.  
FT. MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

1605 S. MAYFAIR RD.  
FT. MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 27-1807776

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBERTS, JOSHUA D  
10061 LAKE COVE DR  
SUITE 202  
FT MYERS, FL 33908 US

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

ROBERTS, JOSHUA D  
1605 S. MAYFAIR RD.  
FT MYERS, FL 33919 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: JOSHUA ROBERTS

01/09/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ROBERTS, JOSHUA D  
Address: 1605 S. MAYFAIR RD.  
City-St-Zip: FT. MYERS, FL 33919

Title: MGRM  
Name: KOSCHTIAL, GORDON  
Address: 10530 CIRCLE PINE RD  
City-St-Zip: NORTH FT. MYERS, FL 33903

Title: MGRM  
Name: VONOHLSO, CYNTHIA L  
Address: 1605 S. MAYFAIR RD.  
City-St-Zip: FT. MYERS, FL 33919

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: JOSHUA ROBERTS

MGRM

01/09/2011

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