

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000014144

**FILED**  
**Jan 15, 2011**  
**Secretary of State**

**Entity Name:** LEIF DISPUTE RESOLUTION, LLC

**Current Principal Place of Business:**

3864 CATANIA PLACE  
JACKSONVILLE, FL, 32224 US

**New Principal Place of Business:**

3864 CATANIA PLACE  
JACKSONVILLE, FL 32224 US

**Current Mailing Address:**

3864 CATANIA PLACE  
JACKSONVILLE, FL, 32224 US

**New Mailing Address:**

3864 CATANIA PLACE  
JACKSONVILLE, FL 32224 US

**FEI Number:** 27-1871881

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

LEIF, LYNNE P  
3864 CATANIA PLACE  
JACKSONVILLE, FL 32224 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:** MGRM  
**Name:** LEIF, GEORGE F  
**Address:** 3864 CATANIA PLACE  
**City-St-Zip:** JACKSONVILLE, FL 32224 US

**Title:** MGR  
**Name:** LEIF, LYNNE P  
**Address:** 3864 CATANIA PLACE  
**City-St-Zip:** JACKSONVILLE, FL 32224 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:** GEORGE F. LEIF

MGRM

01/15/2011

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