

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000015569

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**Entity Name:** SECRET SPOT TROPICAL WATER ICE & ICE CREAM LLC

**Current Principal Place of Business:**

5116 A1A SOUTH  
SAINT AUGUSTINE, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

5116 A1A SOUTH  
SAINT AUGUSTINE, FL 32080

**New Mailing Address:**

**FEI Number:** 26-2343184

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ZIMMERMAN, DENISE L  
5116 A1A SOUTH  
SAINT AUGUSTINE, FL 32980 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:** STEVENS, MELISSA A  
**Address:** 6599 BREVARD STREET  
**City-St-Zip:** SAINT AUGUSTINE, FL 32080

**Title:** MGRM  
**Name:** ELLISON, SHAINEE L  
**Address:** 122 BELLES CHASE COURT  
**City-St-Zip:** SAINT AUGUSTINE, FL 32086

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:** DENISE L. ZIMMERMAN

OWNE

02/23/2011

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