

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000020743

**FILED**  
**Jan 07, 2011**  
**Secretary of State**

**Entity Name:** OUTFITTERS OUTLET LLC

**Current Principal Place of Business:**

6600 BABCOCK ST. SE  
UNIT A  
PALM BAY, FL 32909

**New Principal Place of Business:**

**Current Mailing Address:**

6600 BABCOCK ST. SE  
UNIT A  
PALM BAY, FL 32909

**New Mailing Address:**

**FEI Number:** 61-1612894      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

PATEL, NILAMBEN A  
1340 CIBOLA DR.  
MELBOURNE, FL 32934      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:** PATEL, JYOKSHIPBHAI K  
**Address:** 3678 KESTREL CT.  
**City-St-Zip:** MELBOURNE, FL 32934

**Title:** MGR  
**Name:** PATEL, NILAMBEN A  
**Address:** 1340 CIBOLA DR.  
**City-St-Zip:** MELBOURNE, FL 32934

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:** NILAMBEN PATEL

MGR

01/07/2011

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