

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000029226

**FILED**  
**Mar 12, 2011**  
**Secretary of State**

**Entity Name:** TRANSCOASTAL OUTFITTERS, LLC

**Current Principal Place of Business:**

552 US HIGHWAY 27  
MINNEOLA, FL 34715

**New Principal Place of Business:**

552 US HIGHWAY 27  
#C  
MINNEOLA, FL 34715

**Current Mailing Address:**

19711 STATE ROAD 44  
EUSTIS, FL 32736

**New Mailing Address:**

**FEI Number:** 27-2118408

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REHMAN, DOUGLAS SR.  
19711 STATE ROAD 44  
EUSTIS, FL 32736 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: SOLIS, CARLOS  
Address: 552 US HIGHWAY 27  
City-St-Zip: MINNEOLA, FL 34715 US

Title: MGRM  
Name: SOLIS, SANDRA  
Address: 552 US HIGHWAY 27  
City-St-Zip: MINNEOLA, FL 32736 US

Title: MGRM  
Name: REHMAN, DOUGLAS SR.  
Address: 19711 STATE ROAD 44  
City-St-Zip: EUSTIS, FL 32736 US

Title: MGRM  
Name: REHMAN, JODY  
Address: 19711 STATE ROAD 44  
City-St-Zip: EUSTIS, FL 32736 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: D. DOUGLAS REHMAN, SR.

MGRM

03/12/2011

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