

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000030244

**Entity Name:** A NEW DIMENSION LLC

**FILED**  
**May 01, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

6426 MONTCLAIR BLUFF LANE  
WINDERMERE, FL 34786

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1225  
WINDERMERE, FL 347861225

**New Mailing Address:**

**FEI Number:** 36-4668898

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HAUGHIAN, TINA  
6426 MONTCLAIR BLUFF LANE  
WINDERMERE, FL 34786 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: HAUGHIAN, GARY  
Address: 6426 MONTCLAIR BLUFF LANE  
City-St-Zip: WINDERMERE, FL 34786

Title: MGRM  
Name: BUTLER, TINA  
Address: 14135 HAMPSHIRE BAY CIRCLE  
City-St-Zip: WINTER GARDEN, FL 34787

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: GARY HAUGHIAN

MGRM

05/01/2011

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