

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000040513

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** CCW OF MARION COUNTY, LLC

**Current Principal Place of Business:**

1611 S. SUMMERLIN AVE.  
ORLANDO, FL 32806

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 560462  
ORLANDO, FL 32803

**New Mailing Address:**

**FEI Number:** 27-0450464

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WHITTINGTON, ROBERT  
1611 S. SUMMERLIN AVE.  
ORLANDO, FL 32806 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:** MGR  
**Name:** CLEARY, THOMAS J  
**Address:** 6000 SOWN POINT LANE  
**City-St-Zip:** WINDERMERE, FL 34786

**Title:** MGR  
**Name:** WHITTINGTON, ROBERT  
**Address:** 1611 S. SUMMERLIN AVE.  
**City-St-Zip:** ORLANDO, FL 32806

**Title:** MGR  
**Name:** CHOTAS, ELIAS N  
**Address:** 800 N. MAGNOLIA AVE. SUITE 1500  
**City-St-Zip:** ORLANDO, FL 32803

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:** ROBERT WHITTINGTON

MMG

04/29/2011

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