

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000043897

**FILED**  
**Apr 25, 2011**  
**Secretary of State**

**Entity Name:** CINDY BOYER PHOTOGRAPHY, LLC

**Current Principal Place of Business:**

9002 SE BRIDGE ROAD  
SUITE #1  
HOBE SOUND, FL 33455

**New Principal Place of Business:**

4974 SE INKWOOD WAY  
HOBE SOUND, FL 33455

**Current Mailing Address:**

PO BOX 8249  
HOBE SOUND, FL 33475

**New Mailing Address:**

**FEI Number:** 26-4333839

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOYER, CINDY  
9002 SE BRIDGE ROAD  
SUITE #1  
HOBE SOUND, FL 33455 US

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

BOYER, CINDY  
4874 SE INKWOOD  
HOBE SOUND, FL 33455 US

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: CINDY BOYER

04/25/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MRS.  
Name: CINDY, BOYER  
Address: PO BOX 8249  
City-St-Zip: HOBE SOUND, FL 33475 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: CINDY BOYER

MRS

04/25/2011

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