

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000045493

FILED
Apr 29, 2011
Secretary of State

Entity Name: SELF RELIANCE STRATEGIES LLC

Current Principal Place of Business:

282 KNOT HOLE CIRCLE
CHULUOTA, FL 32766

New Principal Place of Business:

Current Mailing Address:

282 KNOT HOLE CIRCLE
CHULUOTA, FL 32766

New Mailing Address:

FEI Number: 27-4125120

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EGGER, JOHN C
282 KNOT HOLE CIRCLE
CHULUOTA, FL FL 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: EGGER, JOHN C
Address: 282 KNOT HOLE CIRCLE
City-St-Zip: CHULUOTA, FL 32766

Title: MGRM
Name: MARINO, CHRIS N
Address: 499 EMPRESS LANE
City-St-Zip: CHULUOTA, FL 32766

Title: MGRM
Name: OCONNOR, KELLEY F
Address: 156 SHADOW TRAIL
City-St-Zip: LONGWOOD, FL 32750

Title: MGRM
Name: GEORGE, DAVID W
Address: 1137 GALAHAD DRIVE
City-St-Zip: CASSELBERRY, FL 32707

Title: MGRM
Name: TAYLER, MICHAEL G
Address: PO BOX 943
City-St-Zip: GOLDENROD, FL 32735

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: JOHN EGGER

MGMR

04/29/2011

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