

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000046414

Entity Name: WAREAGLERAIER LLC

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

12660 S.W. 34TH PLACE  
DAVIE, FL 33330

**New Principal Place of Business:**

4599 S. UNIVERSITY DR  
DAVIE, FL 33328

**Current Mailing Address:**

12660 S.W. 34TH PLACE  
DAVIE, FL 33330

**New Mailing Address:**

12680 S.W. 34TH PLACE  
DAVIE, FL 33330

FEI Number: 27-2482050

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MALLION, DONNA  
12660 S.W. 34TH PLACE  
DAVIE, FL 33330 US

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

MALLION, DONNA  
12680 S.W. 34TH PLACE  
DAVIE, FL 33330 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: DONNA MALLION

03/14/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: DONNA M. MALLION REVOCABLE TRUST  
Address: 12660 S.W. 34TH PLACE  
City-St-Zip: DAVIE, FL 33330

Title: MGR  
Name: MALLION, DONNA  
Address: 12680 SW 34TH PLACE  
City-St-Zip: DAVIE, FL 333328

Title: MGR  
Name: BROWN, BYRON  
Address: 4599 S. UNIVERSITY DR  
City-St-Zip: DAVIE, FL 33328

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: DONNA MALLION

MGRM

03/14/2011

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