

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000048258

Entity Name: O'B I & F LLC

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2401 GRETCHEN AVE UNIT A  
LEHIGH ACRES, FL 33973

**New Principal Place of Business:**

1214 ARCHDALE ST  
LEHIGH ACRES, FL 33936

**Current Mailing Address:**

2401 GRETCHEN AVE UNIT A  
LEHIGH ACRES, FL 33973

**New Mailing Address:**

1214 ARCHDALE ST  
LEHIGH ACRES, FL 33936

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

LEWIS, ESMOND ESQ.  
5237 SUMMERLIN COMMONS BLVD.  
FORT MYERS, FL 33907 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: O'BRIEN, BRIAN  
Address: 1214 ARCHDALE ST  
City-St-Zip: LEHIGH ACRES, FL 33936

Title: MGR  
Name: SMITH, DALE R  
Address: 1214 ARCHDALE ST  
City-St-Zip: LEHIGH ACRES, FL 33936

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: BRIAN O'BRIEN

MGRM

04/30/2011

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