2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 25, 2011
Secretary of State

DOCUMENT# L10000050819

Entity Name: NORTH END MERCHANTS ORGANIZATION, LLC

Current Principal Place of Business:

214 PINE AVENUE
ANNA MARIA, FL 34216

New Principal Place of Business:

519 PINE AVENUE
ANNA MARIA, FL 34216

Current Mailing Address:

P.O. BOX 1608
ANNA MARIA, FL 34216

New Mailing Address:

P.O. BOX 928
ANNA MARIA, FL 34216

FEI Number: 27-2614413 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

QUINILIVAN, JULIE
214 83RD ST.
HOLMES BEACH, FL 34217 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: GAGNE, DANIEL
Address: 214 PINE AVENUE
City-St-Zip: ANNA MARIA, FL 34216

Title: MGRM
Name: THRASHER, ELIZABETH
Address: 307 PINE AVENUE
City-St-Zip: ANNA MARIA, FL 34216

Title: MGRM
Name: SATO, BARBARA
Address: 519 PINE AVENUE
City-St-Zip: ANNA MARIA, FL 34216

Title: MGRM
Name: CARTER, JOAN
Address: 9701 GULF DRIVE
City-St-Zip: ANNA MARIA, FL 34216

Title: MGRM
Name: WOODWARD, SALLY
Address: 214 83RD ST.
City-St-Zip: HOLMES BEACH, FL 34216

Title: MGRM
Name: HAVELKA, DIANE
Address: 427 PINE AVE
City-St-Zip: ANNA MARIA, FL 34216

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 Statues.

SIGNATURE: DIANE HAVELKA MGRM 02/25/2011

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