

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000055314

**FILED**  
**Jan 26, 2011**  
**Secretary of State**

**Entity Name:** MADEINAMERICACOASTERS, LLC

**Current Principal Place of Business:**

6422-C HARNEY ROAD  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

6422-C HARNEY ROAD  
TAMPA, FL 33610

**New Mailing Address:**

737 NE 74TH STREET  
BOCA RATON, FL 33487

**FEI Number:** 27-2683490

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILDE, ROBERT T  
6422-C  
TAMPA, FL 33610 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:** MGR  
**Name:** REDDEN, STEPHEN D  
**Address:** 6422-C HARNEY ROAD  
**City-St-Zip:** TAMPA, FL 33610

**Title:** MGR  
**Name:** WILDE, ROBERT T  
**Address:** 6422-C HARNEY ROAD  
**City-St-Zip:** TAMPA, FL 33610

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:** ROBERT WILDE

MGR

01/26/2011

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