

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000058042

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

**Entity Name:** FLORIDA DREAM GROUP LLC

**Current Principal Place of Business:**

452 ORIENTA POINT DR  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

452 ORIENTA POINT DR  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SMITKA, GREGORY J  
452 ORIENTA POINT DR  
ALTAMONTE SPRINGS, FL 32701 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:** SMITKA, GEGORY J  
**Address:** 452 ORIENTA POINT DR  
**City-St-Zip:** ALTAMONTE SPRINGS, FL 32701

**Title:** PRES  
**Name:** VERMONT, ANTHONY L  
**Address:** 343 MARCELLA RD  
**City-St-Zip:** PARSIPPANY, NJ 07054

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:** GREGORY J SMITKA

MGR

04/30/2011

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