

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000058202

**FILED**  
**Jan 16, 2012**  
**Secretary of State**

**Entity Name:** THRIFT MART, LLC

**Current Principal Place of Business:**

10770 W. COLONIAL DRIVE  
OCOE, FL 34761

**New Principal Place of Business:**

**Current Mailing Address:**

10770 W. COLONIAL DRIVE  
OCOE, FL 34761

**New Mailing Address:**

**FEI Number:** 27-2746456

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MALLERY, DEBORAH  
10770 WEST COLONIAL DRIVE  
OCOE, FL 34761 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:** MCCANN, BERNADETTE  
**Address:** 10770 WEST COLONIAL DRIVE  
**City-St-Zip:** OCOE, FL 34761

**Title:** P  
**Name:** SIEGEL, JACQUELINE  
**Address:** 10770 WEST COLONIAL DRIVE  
**City-St-Zip:** OCOE, FL 34761

**Title:** S/T  
**Name:** MALLERY, DEBORAH  
**Address:** 10770 WEST COLONIAL DRIVE  
**City-St-Zip:** OCOE, FL 34761

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:** JACQUELINE SIEGEL

P

01/16/2012

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