

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000064779

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** NAKED LLAMA LLC

**Current Principal Place of Business:**

18918 MAISONS DR  
LUTZ, FL 33558

**New Principal Place of Business:**

**Current Mailing Address:**

18918 MAISONS DR  
LUTZ, FL 33558

**New Mailing Address:**

**FEI Number:** 27-2866821

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KIRCHEN, RALPH R  
18918 MAISONS DR  
LUTZ, FL 33558 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:** KIRCHEN, CHAD L  
**Address:** 11225 AVERY OAKS DR  
**City-St-Zip:** TAMPA, FL 33625

**Title:** MGRM  
**Name:** KIRCHEN, RALPH R  
**Address:** 18918 MAISONS DR  
**City-St-Zip:** LUTZ, FL 33558

**Title:** MGRM  
**Name:** VAN VUREN, JON L  
**Address:** 435 MARKET SQUARE E  
**City-St-Zip:** LAKELAND, FL 33813

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:** RALPH R KIRCHEN

MGRM

02/16/2011

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