

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000066690

Entity Name: PADDED DELIVERY, LLC

**FILED**  
**Mar 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

478 E. ALTAMONTE DRIVE  
SUITE 108-311  
ALTAMONTE SPRINGS, FL 32701 US

**New Principal Place of Business:**

**Current Mailing Address:**

478 E. ALTAMONTE DRIVE  
SUITE 108-311  
ALTAMONTE SPRINGS, FL 32701 US

**New Mailing Address:**

FEI Number: 27-3128029

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DISALVO, PHILIP A  
478 E. ALTAMONTE DRIVE  
SUITE 108-311  
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: DISALVO, PHILIP A  
Address: 478 E. ALTAMONTE DRIVE  
City-St-Zip: SUITE 108-311, FL 32701 US

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: PHILIP A DISALVO

MGR

03/11/2011

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