

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000083830

FILED  
Jun 06, 2011  
Secretary of State

**Entity Name:** MARIANNE C. MCAULIFFE, LCSW, P.L.

**Current Principal Place of Business:**

7 CAMELIA STREET  
GUL BREEZE, FL 32561

**New Principal Place of Business:**

403 HOLLYWOOD BLVD.,N.W.  
SUITE 104A  
FT WALTON BCH, FL 32548

**Current Mailing Address:**

7 CAMELIA STREET  
GUL BREEZE, FL 32561

**New Mailing Address:**

403 HOLLYWOOD BLVD.,N.W.  
SUITE 104A  
FT WALTON BCH, FL 32548

**FEI Number:** 27-3229644

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HUSTON, GARY W  
125 W. ROMANA STREET, SUITE 800  
PENSACOLA, FL 32502 US

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

MCAULIFFE, MARIANNE C  
403 HOLLYWOOD BLVD.,N.W.  
SUITE 104A  
FT WALTON BCH, FL 32548 US

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: MARIANNE C MCAULIFFE

06/06/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MCAULIFFE, MARIANNE C  
Address: 403 HOLLYWOOD BLVD.N.W.,SUITE 104A  
City-St-Zip: FT WALTON BCH, FL 32548

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: MARIANNE C. MCAULIFFE

MGRM

06/06/2011

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