

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000086237

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** DAVID LIVELY'S MOBILE WELDING & REPAIR LLC

**Current Principal Place of Business:**

18301 COUNTY ROAD 672  
LITHIA, FL 33547

**New Principal Place of Business:**

**Current Mailing Address:**

18301 COUNTY ROAD 672  
LITHIA, FL 33547

**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:**

LIVELY, DAVID L  
18301 COUNTY ROAD 672  
LITHIA, FL 33547 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: LIVELY, DAVID L  
Address: 18301 COUNTY ROAD 672  
City-St-Zip: LITHIA, FL 33547

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: DAVID L LIVELY

MGMR

04/29/2011

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