

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000106774

Entity Name: SCHNOOKUMS LLC

**FILED**  
**Jan 18, 2011**  
**Secretary of State**

## **Current Principal Place of Business:**

4986 MATTYDALE DRIVE  
TALLAHASSEE, FL 32311

## **New Principal Place of Business:**

1114 THOMASVILLE RD  
E-8  
TALLAHASSEE, FL 32303

## **Current Mailing Address:**

4986 MATTYDALE DRIVE  
TALLAHASSEE, FL 32311

## **New Mailing Address:**

1114 THOMASVILLE RD  
E-8  
TALLAHASSEE, FL 32303

FEI Number: 27-3660041

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLOYD, ARIEL J  
4986 MATTYDALE DRIVE  
TALLAHASSEE, FL 32311 US

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

FLOYD, ARIEL J  
1114 THOMASVILLE RD.  
E-8  
TALLAHASSEE, FL 32303 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:

01/18/2011

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FLOYD, ARIEL J  
Address: 1114 THOMASVILLE RD. E-8  
City-St-Zip: TALLAHASSEE, FL 32303

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: ARIEL FLOYD

MGRM

01/18/2011

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