

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000109687

**FILED**  
**Apr 04, 2011**  
**Secretary of State**

**Entity Name:** MOORE ASSET MANAGEMENT, LLC

**Current Principal Place of Business:**

298 W. SABAL PALM PL  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

298 W. SABAL PALM PL  
LONGWOOD, FL 32779

**New Mailing Address:**

**FEI Number:** 27-3846130

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOSE ANTONIO, LOPEZ MEDINA  
298 W. SABAL PALM PL  
LONGWOOD, FL 32779 US

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

LOPEZ MEDINA, JOSE ANTONIO  
298 W. SABAL PALM PL  
LONGWOOD, FL 32779 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:** JOSE ANTONIO LOPEZ MEDINA

04/04/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** LOPEZ MEDINA, JOSE ANTONIO  
**Address:** 298 W. SABAL PALM PL  
**City-St-Zip:** LONGWOOD, FL 32779

**Title:** MGRM  
**Name:** LOPEZ MEDINA, JOSE MANUEL  
**Address:** 298 W. SABAL PALM PL  
**City-St-Zip:** LONGWOOD, FL 32779

**Title:** MGRM  
**Name:** LOPEZ MEDINA, LUIS MANUEL  
**Address:** 298 SABAL PALM PL  
**City-St-Zip:** LONGWOOD, FL 32779

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:** JOSE ANTONIO LOPEZ MEDINA

MGRM

04/04/2011

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