

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000115173

Entity Name: ABC TAXI, LLC

**FILED**  
**Apr 14, 2011**  
**Secretary of State**

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

5900 CENTRAL AVE STE J  
ST PETERSBURG, FL 33707

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

201 N. FRANKLIN STREET  
SUITE 2000  
TAMPA, FL 33602 US

## **Current Mailing Address:**

5900 CENTRAL AVE STE J  
ST PETERSBURG, FL 33707

## **New Mailing Address:**

201 N. FRANKLIN STREET  
SUITE 2000  
TAMPA, FL 33602 US

FEI Number: 27-3857172

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ANNIS, NATALIE C  
201 N FRANKLIN STREET  
STE 2000  
TAMPA, FL 33602 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: MOSES, MICHAEL J II  
Address: 201 N. FRANKLIN STREET, STE 2000  
City-St-Zip: TAMPA, FL 33602 US

Title: MGR  
Name: CASTELLANO, NANCY J  
Address: 201 N. FRANKLIN STREET, STE 2000  
City-St-Zip: TAMPA, FL 33602 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: MICHAEL J MOSES

MGR

04/14/2011

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