

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000125528

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Entity Name:** C R MORALES ENTERPRISES, LLC

**Current Principal Place of Business:**

230 SE 32ND PL  
OCALA, FL 34471

**New Principal Place of Business:**

1219 W UNIVERSITY AVE STE 10  
GAINESVILLE, FL 32601-519 US

**Current Mailing Address:**

230 SE 32ND PL  
OCALA, FL 34471

**New Mailing Address:**

230 SE 32ND PL  
OCALA, FL 34471 US

**FEI Number:** 27-4201063

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SWANSON, VIVIEN L  
2522 SW 27TH AVE  
OCALA, FL 34471 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:** MORALES, RICARDO  
**Address:** 230 SE 32ND PL  
**City-St-Zip:** Ocala, FL 34471 US

**Title:** MGR  
**Name:** ANGAD, ROMANA A  
**Address:** 1250 NW 68TH AVE  
**City-St-Zip:** Ocala, FL 34482 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:** RICARDO MORALES

PRE

04/11/2011

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