

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000128705

**FILED**  
**Mar 28, 2011**  
**Secretary of State**

**Entity Name:** RESIDENTS FIRST MANAGEMENT LLC

**Current Principal Place of Business:**

14908 WINTERWIND DR  
TAMPA, FL 33624

**New Principal Place of Business:**

**Current Mailing Address:**

14908 WINTERWIND DR  
TAMPA, FL 33624

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

ARQUETTE, GINA M  
14908 WINTERWIND DR  
TAMPA, FL 33624 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:** ARQUETTE, GINA M  
**Address:** 14908 WINTERWIND DR  
**City-St-Zip:** TAMPA, FL 33624

**Title:** MGRM  
**Name:** STALNAKER, JULIE B  
**Address:** 1742 MELLON WAY  
**City-St-Zip:** SARASOTA, FL 34232

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:** GINA ARQUETTE

MGRM

03/28/2011

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