

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000071922

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Entity Name:** JUST CHILLIN' FROZEN YOGURT BAR, LLC

**Current Principal Place of Business:**

7380 FULCRUM AVE  
ORLANDO, FL 32812

**New Principal Place of Business:**

4453 HOFFNER AVE.  
ORLANDO, FL 32812

**Current Mailing Address:**

PO BOX 590353  
ORLANDO, FL 32859

**New Mailing Address:**

**FEI Number:** 38-3847258

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILES, NORA L  
7380 FULCRUM AVE  
ORLANDO, FL 32812 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: MILES, NORA L  
Address: 7380 FULCRUM AVE  
City-St-Zip: ORLANDO, FL 32812

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: NORA MILES

MS.

01/09/2012

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