

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000107977

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** MIRACLE WORKERS OF TAMPA BAY L.L.C

**Current Principal Place of Business:**

3730 MISTWOOD DR  
TAMPA, FL 33619

**New Principal Place of Business:**

**Current Mailing Address:**

3730 MISTWOOD DR  
TAMPA, FL 33619

**New Mailing Address:**

**FEI Number:** 38-3858647

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEWIS, FELICIA D  
3730 MISTWOOD DR  
TAMPA, FL 33619 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: LEWIS, FELICIA D  
Address: 3730 MISTWOOD DR  
City-St-Zip: TAMPA, FL 33619 US

Title: MGR  
Name: LEWIS, CALVIN J SR  
Address: 3730 MISTWOOD DR  
City-St-Zip: TAMPA, FL 33619 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: CALVIN J LEWIS SR

MGR

04/24/2012

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