

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000115990

Entity Name: BIG PAW PET CARE, LLC

**FILED**  
**Feb 18, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

13506 SUMMERPORT VILLAGE PARKWAY  
#759  
WINDERMERE, FL 34786 US

**New Principal Place of Business:**

**Current Mailing Address:**

13506 SUMMERPORT VILLAGE PARKWAY  
#759  
WINDERMERE, FL 34786 US

**New Mailing Address:**

FEI Number: 45-3571328

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MEIBUHR, MICHAEL  
8578 LEELAND ARCHER BLVD  
ORLANDO, FL 32836 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: MEIBUHR, MICHAEL  
Address: 13506 SUMMERPORT VILLAGE PARKWAY #759  
City-St-Zip: WINDERMERE, FL 34786 US

Title: MGRM  
Name: MEIBUHR, ANNETTE  
Address: 13506 SUMMERPORT VILLAGE PARKWAY #759  
City-St-Zip: WINDERMERE, FL 34786 US

Title: MGRM  
Name: STANDEFER, JOHN B  
Address: 13506 SUMMERPORT VILLAGE PARKWAY #759  
City-St-Zip: WINDERMERE, FL 34786 US

Title: MGRM  
Name: DUKE, HOLLACE A  
Address: 13506 SUMMERPORT VILLAGE PARKWAY #759  
City-St-Zip: WINDERMERE, FL 34786 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 S MEIBUHR

MGRM

02/18/2012

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