

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L94000000276

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** TAKE FIVE, L.C.

**Current Principal Place of Business:**

7250 S KIRKMAN RD.  
STE. #100  
ORLANDO, FL 32819

**New Principal Place of Business:**

**Current Mailing Address:**

7250 S KIRKMAN RD.  
STE. #100  
ORLANDO, FL 32819

**New Mailing Address:**

**FEI Number:** 59-3249563

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SEMAAN, FADI T  
7250 S. KIRKMAN RD.  
STE. #100  
ORLANDO, FL 32819 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:** SEMAAN, FADI T  
**Address:** 7250 S. KIRKMAN RD. STE. #100  
**City-St-Zip:** ORLANDO, FL 32819

**Title:** MGR  
**Name:** SEMAAN, EMEL S  
**Address:** 7250 S. KIRKMAN RD #100  
**City-St-Zip:** ORLANDO, FL 32819

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:** FADI SEMAAN

MGR

04/26/2011

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