

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000000895

Entity Name: ROBERT LEE FOWLER, LLC

FILED  
Apr 26, 2011  
Secretary of State

**Current Principal Place of Business:**

201 ORCHARD STREET  
LEAVENWORTH, WA 98826

**New Principal Place of Business:**

**Current Mailing Address:**

201 ORCHARD STREET  
LEAVENWORTH, WA 98826

**New Mailing Address:**

FEI Number: 20-3660140

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FOWLER, ROBERT  
14090 METROPOLIS AVE SUITE 206  
FT MYERS, FL 33912 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: FOWLER, ROBERT  
Address: 14090 METROPOLIS AVE., STE 206  
City-St-Zip: FORT MYERS, FL 33912

Title: MGR  
Name: J-NISSI  
Address: 7528 CAMERON CIR  
City-St-Zip: FT. MYERS, FL 33912

Title: MGR  
Name: J-JIREH  
Address: 1001 DUTCH ROAD  
City-St-Zip: CARROLLTOWN, PA 15722

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: ROBERT FOWLER

MGR

04/26/2011

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