2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 20, 2011
Secretary of State

DOCUMENT# M08000000906

Entity Name: SAFARA ASSOCIATES LLC

Current Principal Place of Business:

235 APOLLO BEACH BLVD #212
APOLLO BEACH, FL 33572

New Principal Place of Business:

235 APOLLO BEACH BLVD.
#212
APOLLO BEACH, FL 33572 US

Current Mailing Address:

235 APOLLO BEACH BLVD #212
APOLLO BEACH, FL 33572

New Mailing Address:

235 APOLLO BEACH BLVD.
#212
APOLLO BEACH, FL 33572 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: P
Name: CARMACK, ROBERT
Address: 9 E. LOOCKERMAN ST. SUITE 205
City-St-Zip: DOVER, DE 19901

Title: V
Name: CARMACK, ROBERT
Address: 9 E. LOOCKERMAN ST. SUITE 205
City-St-Zip: DOVER, DE 19901

Title: S
Name: CARMACK, ROBERT
Address: 9 E. LOOCKERMAN ST. SUITE 205
City-St-Zip: DOVER, DE 19901

Title: T
Name: CARMACK, ROBERT
Address: 9 E. LOOCKERMAN ST. SUITE 205
City-St-Zip: DOVER, DE 19901

Title: D
Name: CARMACK, ROBERT
Address: 9 E. LOOCKERMAN ST. SUITE 205
City-St-Zip: DOVER, DE 19901

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 Statues.

SIGNATURE: CARMACK MGRM 04/20/2011

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