

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000002987

Entity Name: ANNIKA ENTERPRISES, LLC

**FILED**  
**Jan 06, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

% ANNIKA, 800 MAIN STREET, PMB 154  
HOLDEN, MA 01520

**New Principal Place of Business:**

9685 LAKE NONA VILLAGE PLACE  
STE 205  
ORLANDO, FL 32827

**Current Mailing Address:**

% ANNIKA, 800 MAIN STREET, PMB 154  
HOLDEN, MA 01520

**New Mailing Address:**

5 SOUTHSIDE DR STE 11 - 237  
CLIFTON PARK, NY 12065

FEI Number: 27-0258185

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: SORENSIAM, ANNIKA C  
Address: 5 SOUTHSIDE DRIVE, STE 11 - 237  
City-St-Zip: CLIFTON PARK, NY 12065

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: ANNIKA C. SORENSTAM

MGR

01/06/2011

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