

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000002587

Entity Name: PMR COMPANIES LLC

**FILED**  
**Mar 24, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

325 W. MAIN STREET, SUITE 1012  
LOUISVILLE, KY 40202

**New Principal Place of Business:**

963-965 BAXTER AVENUE  
LOUISVILLE, KY 40204

**Current Mailing Address:**

325 W. MAIN STREET, SUITE 1012  
LOUISVILLE, KY 40202

**New Mailing Address:**

963-965 BAXTER AVENUE  
LOUISVILLE, KY 40204

FEI Number: 20-5972089

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: MGRM  
Name: CHARLTON, DEBORAH H  
Address: 963-965 BAXTER AVENUE  
City-St-Zip: LOUISVILLE, KY 40204

Title: P  
Name: CHARLTON, DEBORAH H  
Address: 963-965 BAXTER AVENUE  
City-St-Zip: LOUISVILLE, KY 40204

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: DEBORAH H CHARLTON

MGRM

03/24/2011

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