

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000004967

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

**Entity Name:** SUBURBAN FLORIDA ACCESSORY CENTER, LLC

**Current Principal Place of Business:**

1795 MAPLELAWN DRIVE  
TROY, MI 48084

**New Principal Place of Business:**

**Current Mailing Address:**

1795 MAPLELAWN DRIVE  
TROY, MI 48084

**New Mailing Address:**

P.O. BOX 909  
TROY, MI 48099

**FEI Number:** 27-3562590

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AUPPERLEE, BRENDA  
1220 N MILITARY TRAIL  
WEST PALM BEACH, FL 33409 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: SUBURBAN EQUITIES, INC.  
Address: 1795 MAPLELAWN DRIVE  
City-St-Zip: TROY, MI 48084

Title: MGRM  
Name: FISCHER, DAVID T  
Address: 1795 MAPLELAWN DRIVE  
City-St-Zip: TROY, MI 48084

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: TIMOTHY LEROY FOR SUBURBAN EQUITIES, INC. MGRM 04/26/2011

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