

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000030829

**Entity Name:** EXHILARATE LLC

**Current Principal Place of Business:**

8601 COMMODITY CIRCLE  
ORLANDO, FL 32819

**Current Mailing Address:**

8601 COMMODITY CIRCLE  
ORLANDO, FL 32819 US

**FEI Number:** 26-2582622

**Certificate of Status Desired:** No

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

PAUL BARABE, STACEY A  
8601 COMMODITY CIRCLE  
ORLANDO, FL 32819 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name PAUL BARABE, STACEY A  
Address 8601 COMMODITY CIRCLE  
City-State-Zip: ORLANDO FL 32819

Title MGR  
Name BARABE, JOHN E  
Address 4720 GIFFORD BLVD  
City-State-Zip: ORLANDO FL 32819

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STACEY PAUL BARABE

**MGRM**

**01/16/2013**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date