

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000007700

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Entity Name:** SEYMOUR POWERS CORPORATION, L.L.C.

**Current Principal Place of Business:**

MACLEAN AND EMA  
2600 NE 14TH STREET CAUSEWAY  
POMPANO BEACH, FL 33062

**New Principal Place of Business:**

120 BUTLER STREET  
B  
WEST PALM BEACH, FL 33407 US

**Current Mailing Address:**

MACLEAN AND EMA  
2600 NE 14TH STREET CAUSEWAY  
POMPANO BEACH, FL 33062

**New Mailing Address:**

120 BUTLER STREET  
B  
WEST PALM BEACH, FL 33407 US

**FEI Number:** 65-1026969

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KENNEY, TIMOTHY H ESQ  
120 BUTLER STREET  
SUITE B  
WEST PALM BEACH, FL 33407 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: SEYMOUR R. POWERS REVOCABLE TRUST  
Address: 146 DEER HILL AVENUE  
City-St-Zip: DANBURY, CT 06810

Title: MGRM  
Name: ALICE M. POWERS REVOCABLE TRUST  
Address: 4869 TALLOWOOD LANE  
City-St-Zip: BOCA RATON, FL 33487

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: ALICE M. POWERS, TRUSTEE

MGRM

04/27/2012

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