

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000020525

Entity Name: DEAN W. LARSON, LLC

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

15620 NEW HAMPSHIRE COURT  
FORT MYERS, FL 33908

**New Principal Place of Business:**

**Current Mailing Address:**

15620 NEW HAMPSHIRE COURT  
FORT MYERS, FL 33908

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

LARSON, DEAN W  
15620 NEW HAMPSHIRE COURT  
FORT MYERS, FL 33908 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: LARSON, DEAN W  
Address: 15620 NEW HAMPSHIRE COURT  
City-St-Zip: FORT MYERS, FL 33908

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: DEAN W LARSON

MGRM

02/08/2012

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