

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000006598

Entity Name: 717 ASSOCIATES, LLC

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

11 VALIANT DR.  
COVENTRY, RI 02816

**New Principal Place of Business:**

9 CEDAR POND DRIVE  
APT.# 12  
WARWICK, RI 02886

**Current Mailing Address:**

11 VALIANT DR.  
COVENTRY, RI 02816

**New Mailing Address:**

9 CEDAR POND DRIVE  
APT.# 12  
WARWICK, RI 02886

FEI Number: 41-2202298

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

BAILEY, STEVE  
5261 SABLE TRACE DRIVE  
NORTH PORT, FL 342873173 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: SEPE, JOSEPH M  
Address: 9 CEDAR POND DRIVE  
City-St-Zip: WARWICK, RI 02886

Title: MGRM  
Name: SEPE, GEORGE  
Address: 2202 CRANSTON STREET  
City-St-Zip: CRANSTON, RI 02920

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: JOSEPH M SEPE

MGRM

01/05/2012

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