

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000049304

**FILED**  
**Jan 17, 2012**  
**Secretary of State**

**Entity Name:** ROYAL PALM PROFESSIONAL CENTRE, LLC

**Current Principal Place of Business:**

3903 POSTRIDGE TRAIL  
MELBOURNE, FL 32934

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 410686  
MELBOURNE, FL 32941

**New Mailing Address:**

**FEI Number:** 42-1697308

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOLOGNA-GARAGOZLO, PATRICIA E  
3903 POSTRIDGE TRAIL  
MELBOURNE, FL 32934 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: PSP OF BREVARD, LLC  
Address: PO BOX 410686  
City-St-Zip: MELBOURNE, FL 32941

Title: MGRM  
Name: RRLS LLC  
Address: 28 MARSHALL AVENUE  
City-St-Zip: FLORAL PARK, NY 11001

Title: MGRM  
Name: RTLD LLC  
Address: 11 NANCY ROAD  
City-St-Zip: NANUET, NY 10954

Title: MGRM  
Name: KJVIERA, LLC  
Address: 963 LOGGERHEAD ISLAND DRIVE  
City-St-Zip: SATELLITE BEACH, FL 32937

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: PATRICIA E. BOLOGNA GARAGOZLO

MGMR

01/17/2012

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