

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000068865

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

**Entity Name:** SENSORY PROCESSING DISORDER PRODUCTS, LLC

**Current Principal Place of Business:**

11147 57TH AVE  
SEMINOLE, FL 33772

**New Principal Place of Business:**

**Current Mailing Address:**

11147 57TH AVE  
SEMINOLE, FL 33772

**New Mailing Address:**

FEI Number: 27-2939335

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

QUICK-MCCROSKY, JILL D  
11147 57TH AVE  
SEMINOLE, FL 33772 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: MGR  
Name: QUICK-MCCROSKY, JILL D  
Address: 11147 57TH AVE  
City-St-Zip: SEMINOLE, FL 33772

Title: MGR  
Name: PERRY, JUDY Q  
Address: 11399 60TH TERRACE NORTH  
City-St-Zip: SEMINOLE, FL 33772

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: JILL QUICK-MCCROSKY

MGR

02/08/2012

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