

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000129268

Entity Name: AV MENTOR, LLC

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

15117 PRINCEWOOD LANE  
LAND O LAKES, FL 34638 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2514  
LAND O LAKES, FL 34639 US

**New Mailing Address:**

FEI Number: 45-3801381

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

KERR, ANDREW L  
15117 PRINCEWOOD LANE  
LAND O LAKES, FL 34638 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: KERR, ANDREW L  
Address: P.O. BOX 2514  
City-St-Zip: LAND O LAKES, FL 34639 US

Title: MGRM  
Name: KERR, DEBORAH L  
Address: P.O. BOX 2514  
City-St-Zip: LAND O LAKES, FL 34639 US

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: ANDREW L KERR

CEO

03/20/2012

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