

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000024671

Entity Name: NECC OF FLORIDA, LLC**Current Principal Place of Business:**5401 BROKEN SOUND BLVD NW
BOCA RATON, FL 33487**Current Mailing Address:**50 APPLIED CARD WAY
GLEN MILLS, PA 19342**FEI Number:** 34-1988122**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ABESSINIO, ROCCO A
C/O APPLIED CARD SYSTEMS, INC.
5401 BROKEN SOUND BLVD. NW
BOCA RATON, FL 33487 US*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

Authorized Person(s) Detail :

Title MGRM
Name ABESSINIO, ROCCO A
Address 50 APPLIED CARD WAY
City-State-Zip: GLEN MILLS PA 19342

Title V
Name ABESSINIO, MARY F
Address 50 APPLIED CARD WAY
City-State-Zip: GLEN MILLS PA 19342

Title VS
Name ABESSINIO, PETER G
Address 50 APPLIED CARD WAY
City-State-Zip: GLEN MILLS PA 19342

Title VT
Name ABESSINIO, VINCENT T
Address 50 APPLIED CARD WAY
City-State-Zip: GLEN MILLS PA 19342

Title V
Name COOL, MARY D
Address 50 APPLIED CARD WAY
City-State-Zip: GLEN MILLS PA 19342

Title V
Name FABRIZIO, JOANNE F
Address 50 APPLIED CARD WAY
City-State-Zip: GLEN MILLS PA 19342

I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROCCO A. ABESSINIO

MGR

04/25/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date