

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000044986

**Entity Name:** THE ACCOUNTANT'S PEACE I, L.L.C.

**Current Principal Place of Business:**

4115 S.W. 72ND AVE.  
MIAMI, FL 33155

**Current Mailing Address:**

3001 PONCE DE LEON BLVD.  
SUITE 211  
CORAL GABLES, FL 33134 US

**FEI Number:** 26-2519826

**Certificate of Status Desired:** No

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

COLBERT BOUE AND JUNCADELLA, P.A.  
3001 PONCE DE LEON BLVD.  
SUITE 211  
CORAL GABLES, FL 33134 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 FIGUEROA, STEPHANIE  
Address 1116 ASTURIA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name ROBINSON, LEWIS  
Address 2351 KEYSTONE BLVD.  
City-State-Zip: NORTH MIAMI FL 33181

Title MGR  
Name BAILEY, RAY GEORGE B  
Address 4115 SW 72 AVE.  
City-State-Zip: MIAMI FL 33134

Title MGR  
Name HOULZET, WILLIAM  
Address 7 COCONUT LANE  
City-State-Zip: KEY BISCAVNE FL 33149

Title MGR  
Name DAVIS, BERNARD  
Address 11121 S.W. 75TH COURT  
City-State-Zip: MIAMI FL 33156

*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:** STEPHANIE FIGUEROA

MGRM

04/26/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date