## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000118953

Entity Name: LA VICTORIA FARM LLC

Current Principal Place of Business:

12180 SOUTH SHORE BLVD. SUITE 101A

WELLINGTON, FL 33414

**Current Mailing Address:** 

12180 SOUTH SHORE BLVD. SUITE 101A WELLINGTON, FL 33414 US

FEI Number: 45-4245170 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WEDGE ASSOCIATES LLC 12180 SOUTH SHORE BLVD. SUITE 101A WELLINGTON, FL 33414 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 Title MGRM

Name MAURICE C. PERKINS III REVOCABLE Name DEBORAH W. PERKINS REVOCABLE

TRUST TRUST

Address 11124 ISLE BROOK COURT Address 11124 ISLE BROOK COURT

City-State-Zip: WELLINGOTN FL 33414 City-State-Zip: WELLINGTON FL 33414

Title MGR Title MGR

Name WEDGE, WILLIAM J. ESQ. Name PERKINS, MAURICE CIII

Address 12180 SOUTH SHORE BLVD. Address 11124 ISLE BROOK COURT

SUITE 101A City-State-Zip: WELLINGTON FL 33414

City-State-Zip: WELLINGTON FL 33414

Title MGRM

Name PERKINS FAMILY TRUST U/A

11/20/2012

Address C/O DAVID L DUFORT, DISERIO

MARTIN O'CONNO

City-State-Zip: STAMFORD CT 06901

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: WILLIAM J WEDGE MANAGER 04/16/2013

FILED Apr 16, 2013

**Secretary of State** 

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