

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000008277

Entity Name: MAVOLIC, L.L.C.

**FILED**  
**Apr 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5230 PRAIRIE DUNES VILLAGE CIRCLE  
LAKE WORTH, FL 33463 US

**New Principal Place of Business:**

**Current Mailing Address:**

5230 PRAIRIE DUNES VILLAGE CIRCLE  
LAKE WORTH, FL 33463 US

**New Mailing Address:**

FEI Number: 65-1029331

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VOGT, WILLY  
5230 PRAIRIE DUNES VILLAGE CIRCLE  
LAKE WORTH, FL 33463 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: VOGT, WILLY E MGR  
Address: 5230 PRAIRIE DUNES VILLAGE CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463 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: WILLY VOGT

MGR

04/01/2012

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