

**2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000011027

Entity Name: PROVIDENCE A.D., LLC

**FILED  
Jan 08, 2012  
Secretary of State**

**Current Principal Place of Business:**

2034 BAYSIDE AVENUE  
MOUNT DORA, FL 32757

**New Principal Place of Business:**

**Current Mailing Address:**

2034 BAYSIDE AVENUE  
MOUNT DORA, FL 32757

**New Mailing Address:**

FEI Number: 59-3721117      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

SANDERS, AUDREY  
2034 BAYSIDE AVENUE  
MOUNT DORA, FL 32757      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: SANDERS, AUDREY MS  
Address: 2034 BAYSIDE AVENUE  
City-St-Zip: MOUNT DORA, FL 32757

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: AUDREY SANDERS      MGR      01/08/2012

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