

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000009742

Entity Name: GELPID ASSOCIATES LLC

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

2701 NE 33 RD STREET  
FT. LAUDERDALE, FL 33306

## **New Principal Place of Business:**

401 E LAS OLAS BLVD  
UNIT 130-460  
FT. LAUDERDALE, FL 33301

## **Current Mailing Address:**

2701 NE 33 RD STREET  
FT. LAUDERDALE, FL 33306

## **New Mailing Address:**

401 E LAS OLAS BLVD  
UNIT 130-460  
FT. LAUDERDALE, FL 33301

FEI Number: 65-1123651

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHIARI, CHRISTIAN  
2701 NE 33 RD STREET  
FT. LAUDERDALE, FL 33306 US

## **Name and Address of New Registered Agent:**

CHIARI, ROBERT  
401 E LAS OLAS BLVD  
UNIT 130-468  
FT. LAUDERDALE, FL 33301 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: ROBERT CHIARI

01/04/2012

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CHIARI, CHRISTIAN T  
Address: 401 E LAS OLAS BLVD 130-460  
City-St-Zip: FT. LAUDERDALE, FL 33301

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: CHRISTIAN CHIARI

MGRM

01/04/2012

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