

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000011688

**FILED**  
**Mar 09, 2012**  
**Secretary of State**

**Entity Name:** FALKENBURG BUSINESS CENTER, LLC

**Current Principal Place of Business:**

10134 FISHER AVE  
TAMPA, FL 33689

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 89395  
TAMPA, FL 33689

**New Mailing Address:**

**FEI Number:** 01-0690969

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REIBER, SAM I ESQ.  
601 E. TWIGGS ST., SUITE 200  
TAMPA, FL 33602 US

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

GRACE, JOE I  
8904 REGENTS PARK DR  
TAMPA, FL 33647 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: J GRACE

03/09/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: GRACE, JOSEPH J JR.  
Address: P.O. BOX 89395  
City-St-Zip: TAMPA, FL 33689

Title: MGR  
Name: GRACE, ROBIN C  
Address: P.O. BOX 89395  
City-St-Zip: TAMPA, FL 33689

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: JOSEPH GRACE

MGR

03/09/2012

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