

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000023837

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

**Entity Name:** TODD ASSOCIATES FOOD EQUIPMENT SERVICES L.L.C.

**Current Principal Place of Business:**

5427 ASHTON CT  
SARASOTA, FL 34233 US

**New Principal Place of Business:**

**Current Mailing Address:**

5427 ASHTON CT  
SARASOTA, FL 34233 US

**New Mailing Address:**

**FEI Number:** 13-4214634

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

TODD, NORMAN J  
1151 SOUTH CYPRESS PT DR  
VENICE, FL 34293 US

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

TODD, NORMAN J  
4125 MACAULAY LANE  
SARASOTA, FL 34241 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

02/01/2012

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: TODD, NORMAN  
Address: 4125 MACAULAY LANE  
City-St-Zip: SARASOTA, FL 34241

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: NORMAN TODD

MGR

02/01/2012

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