

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000006172

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** PFP LLC

**Current Principal Place of Business:**

1516 FORT SMITH BULIVARD  
DELTONA, FL 32725

**New Principal Place of Business:**

**Current Mailing Address:**

915 DOYLE ROAD  
SUITE 303 - BOX 107  
DELTONA, FL 32725

**New Mailing Address:**

**FEI Number:** 20-4389025

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PHELPS, DAVID CHRMAN  
1516 FORT SMITH BLVD  
DELTONA, FL 32725 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:** MGRM  
**Name:** PHELPS, RUTH H CEO  
**Address:** 915 DOYLE ROAD - SUITE 303 - BOX 107  
**City-St-Zip:** DELTONA, FL 32725

**Title:** MGR  
**Name:** PHELPS, DAVID CHRMAN  
**Address:** 915 DOYLE ROAD - SUITE 303 - BOX 107  
**City-St-Zip:** DELTONA, FL 32725

**Title:** MGRM  
**Name:** COLEMAN, MICHAEL J PRES.  
**Address:** 915 DOYLE ROAD - SUITE 303 - BOX 107  
**City-St-Zip:** DELTONA, FL 32725

**Title:** MGRM  
**Name:** CHEN, DANIEL P PARTNER  
**Address:** 915 DOYLE ROAD - SUITE 303 - BOX 107  
**City-St-Zip:** DELTONA, FL 32725

**Title:** MGRM  
**Name:** LITTLE, JIMMY PARTNER  
**Address:** 915 DOYLE ROAD - SUITE 303 - BOX 107  
**City-St-Zip:** DELTONA, FL 32725

**Title:** MGRM  
**Name:** GABRIEL VENTURES, LLC  
**Address:** 915 DOYLE ROAD - SUITE 303 - BOX 107  
**City-St-Zip:** DELTONA, FL 32725

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:** DAVID PHELPS

MGR

04/30/2012

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