

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L03000013619

Entity Name: FEMILLIONAIRES, LLC

**FILED**  
**Jun 13, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

812 SWEETWATER CLUB BLVD  
LONGWOOD, FL 32779

**New Principal Place of Business:**

812 SWEETWATER CLUB BLVD  
LONGWOOD, FL 32779 US

**Current Mailing Address:**

P.O. BOX 915115  
LONGWOOD, FL 32791

**New Mailing Address:**

P.O. BOX 915115  
LONGWOOD, FL 32791 US

FEI Number: 57-1161596

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALEXANDER, DR. SRANLEY SR  
812 SWEETWATER CLUB BLVD.  
LONGWOOD, FL 32779 US

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

ALEXANDER, DR. FLORENCE  
812 SWEETWATER CLUB BLVD.  
LONGWOOD, FL 32779 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: DR. FLORENCE ALEXANDER

06/13/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ALEXANDER, DR. FLORENCE  
Address: 812 SWEETWATER CLUB BLVD  
City-St-Zip: LONGWOOD, FL 32779

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: DR FLORENCE ALEXANDER

MGRM

06/13/2012

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