

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000017752

FILED
Apr 30, 2012
Secretary of State

Entity Name: LDL ACCOUNTANT & ASSOCIATES CPA'S, LLC

Current Principal Place of Business:

5425 S SEMORAN BLVD
STE 10-B
ORLANDO, FL 328221777 US

New Principal Place of Business:

5425 S SEMORAN BLVD
STE 10-B
ORLANDO, FL 32822 US

Current Mailing Address:

PO BOX 720746
ORLANDO, FL 328720746 US

New Mailing Address:

FEI Number: 56-2356834

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIVENCIA, DAVID
7205 E CURRYFORD RD
3
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

OLIVENCIA, DAVID
5425 S SEMORAN BLVD
10-B
ORLANDO, FL 32822 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: DAVID OLIVENCIA

04/30/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: OLIVENCIA, DAVID
Address: P.O. BOX 574993
City-St-Zip: ORLANDO, FL 328574993

Title: MGR
Name: OLIVENCIA, ELIZABETH
Address: P.O. BOX 574993
City-St-Zip: ORLANDO, FL 328574993

Title: MGR
Name: SEKAJIPO, LAWRENCE CPA
Address: 7402 N. 56TH STREET, STE. 880
City-St-Zip: TAMPA, FL 336174414

Title: MGRM
Name: ABRAHAM, HECTOR
Address: PO BOX 720746
City-St-Zip: ORLANDO, FL 328720746

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 OLIVENCIA

MGR

04/30/2012

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