

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000024156

**Entity Name:** BABS ENTERPRISES, L.L.C.

**FILED**  
**Jan 03, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2800 SUPERIOR AVE  
MIDDLETOWN, OH 45044 US

**New Principal Place of Business:**

**Current Mailing Address:**

2800 SUPERIOR AVE  
MIDDLETOWN, OH 45044 US

**New Mailing Address:**

**FEI Number:** 13-4258312

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PEARCE, BARBARA A  
2800 SUPERIOR AVE  
MIDDLETOWN, FL 45044 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:** MRS.  
**Name:** PEARCE, BARBARA A  
**Address:** 2800 SUPERIOR AVE  
**City-St-Zip:** MIDDLETOWN, OH 45044

**Title:** MR.  
**Name:** PEARCE, JAMES T  
**Address:** 2800 SUPERIOR AVE  
**City-St-Zip:** MIDDLETOWN, OH 45044

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:** JAMES T. PEARCE

MEMB

01/03/2012

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