

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000032895

**FILED**  
**Mar 14, 2012**  
**Secretary of State**

**Entity Name:** ALESAR ABSTRACTING, L.L.C.

**Current Principal Place of Business:**

109 ANDREWS ROAD  
SANFORD, FL 32773 US

**New Principal Place of Business:**

**Current Mailing Address:**

109 ANDREWS ROAD  
SANFORD, FL 32773 US

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

JONES, C. ROBERT JR.  
109 ANDREWS ROAD  
SANFORD, FL 32773 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: JONES, C. ROBERT JR.  
Address: 109 ANDREWS ROAD  
City-St-Zip: SANFORD, FL 32773 US

Title: MGRM  
Name: JONES, LUANN S  
Address: 109 ANDREWS ROAD  
City-St-Zip: SANFORD, FL 32773 US

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:** C. ROBERT JONES, JR.

MGRM

03/14/2012

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