

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000040494

Entity Name: KATHLEEN M. PRICE, LLC

**FILED**  
**Apr 18, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

400 REGENT PARK  
PALM BEACH, FL 33480

**New Principal Place of Business:**

718 LAKESIDE CRICLE  
NORTH PALM BEACH, FL 33408

**Current Mailing Address:**

400 REGENT PARK  
PALM BEACH, FL 33480

**New Mailing Address:**

718 LAKESIDE CRICLE  
NORTH PALM BEACH, FL 33408

FEI Number: 45-0526872

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PRICE, KATHLEEN M  
400 REGENT PARK  
PALM BEACH, FL 33480 US

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

CERASARO, KATHLEEN M  
718 LAKESIDE CIRCLE  
NORTH PALM BEACH, FL 33408 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: KATHLEEN M. CERASARO

04/18/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CERASARO, KATHLEEN M  
Address: 718 LAKESIDE CRICLE  
City-St-Zip: NORTH PALM BEACH, FL 33408

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: KATHLEEN M. CERASARO

MGR

04/18/2012

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