

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000000508

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** RINELLA FAMILY LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

4900 W. BROWARD BLVD.  
PLANTATION, FL 33317

**New Principal Place of Business:**

**Current Mailing Address:**

4900 W. BROWARD BLVD.  
PLANTATION, FL 33317

**New Mailing Address:**

FEI Number: 20-1042444

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RINELLA, JOHN L MD  
4900 W BROWARD BLVD  
PLANTATION, FL 33317 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: MGR  
Name: RINELLA, JOHN  
Address: 4900 W. BROWARD BLVD.  
City-St-Zip: PLANTATION, FL 33317

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: JOHN RINELLA

MGR

04/25/2012

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