

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000008991

**FILED**  
**Jan 30, 2012**  
**Secretary of State**

**Entity Name:** ABC CHILD DEVELOPMENT CENTER LLC

**Current Principal Place of Business:**

801 MARTIN LUTHER KING JR, BLVD.  
BROOKSVILLE, FL 34601

**New Principal Place of Business:**

801 W. MARTIN LUTHER KING JR, BLVD.  
BROOKSVILLE, FL 34601

**Current Mailing Address:**

512 35TH STREET  
UNION CITY, NJ 07087

**New Mailing Address:**

**FEI Number:** 20-0754531

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHAMIZO, ROSA I  
13207 DON LOOP  
SPRING HILL, FL 34609 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: CHAMIZO, ROSA I  
Address: 13207 DON LOOP  
City-St-Zip: SPRING HILL, FL 34609

Title: MGRM  
Name: CHAMIZO, ROBERTO  
Address: 13207 DON LOOP  
City-St-Zip: SPRING HILL, FL 34609

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: ROSA CHAMIZO

MGRM

01/30/2012

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