

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000048911

Entity Name: ARBDA, L.L.C.

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4923 NW 27TH COURT  
GAINESVILLE, FL 32606

**New Principal Place of Business:**

**Current Mailing Address:**

4642 NW 12TH PLACE  
GAINESVILLE, FL 32605

**New Mailing Address:**

FEI Number: 20-1353269

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPIESS, BARBARA K  
4642 NW 12TH PLACE  
GAINESVILLE, FL 32605 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: SPIESS, DANIEL L  
Address: 4642 NW 12TH PLACE  
City-St-Zip: GAINESVILLE, FL 32605

Title: MGRM  
Name: SPIESS, BARBARA K  
Address: 4642 NW 12TH PLACE  
City-St-Zip: GAINESVILLE, FL 32605

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: BARBARA SPIESS

MGRM

02/09/2012

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