

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000053493

Entity Name: MOE'S REGENCY, L.L.C.

**FILED**  
**Apr 20, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

450-106 STATE ROAD 13 NORTH,  
#213  
ST. JOHNS, FL 32259

**New Principal Place of Business:**

**Current Mailing Address:**

450-106 STATE ROAD 13 NORTH,  
#213  
ST. JOHNS, FL 32259

**New Mailing Address:**

FEI Number: 74-3130570

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHASTEEN, BRAD K MGRM  
450-106 STATE ROAD 13 NORTH,  
#213  
ST. JOHNS, FL 32259 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: CHASTEEN, BRAD K MGRM  
Address: 450-106 SR 13 N, #213  
City-St-Zip: ST. JOHNS, FL 32259

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: BRAD CHASTEEN

MR

04/20/2012

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