

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000059254

Entity Name: LUMAREN, LLC

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5292 NW 76TH CT  
OCALA, FL 34482

**New Principal Place of Business:**

**Current Mailing Address:**

5292 NW 76TH CT  
OCALA, FL 34482

**New Mailing Address:**

FEI Number: 20-1469888

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SWANSON, VIVIEN L  
2522 SW 27TH AVE  
OCALA, FL 34474 US

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

BEHRENS, MARIA C  
5292 NW, 76TH CT.  
OCALA, FL 34482 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: MARIA C BEHRENS

04/11/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MRG  
Name: LUIS E LOPEZ AS TRUSTEE OF THE LUIS E LOPE  
Address: 5292 NW, 76 CT.  
City-St-Zip: OCALA, FL 34482

Title: MGR  
Name: MARIA C SOLTURA DE LOPEZ AS TRUSTEE OF THE  
Address: 5292 NW, 76CT.  
City-St-Zip: OCALA, FL 33178

Title: MGR  
Name: BEHRENS, ENRIQUE E  
Address: PO BOX 41371  
City-St-Zip: ST. PETERSBURG, FL 33743

Title: MGR  
Name: BEHRENS, MARIA  
Address: 5292 NW 76TH CT  
City-St-Zip: OCALA, FL 34482

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: MARIA C BEHRENS

MGR

04/11/2012

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