

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000083914

Entity Name: AUSTIN LEE, LLC

**FILED**  
**Apr 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

69 GREY DAPPLE WAY  
ORMOND BEACH, FL 32174

**New Principal Place of Business:**

60 JILL ALISON CIRCLE  
ORMOND BEACH, FL 32176

**Current Mailing Address:**

P.O. BOX 730549  
ORMOND BEACH, FL 32173

**New Mailing Address:**

FEI Number: 14-1918420

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CROTTY, KATHY  
1825 BUSINESS PARK BLVD.  
SUITE A  
DAYTONA BEACH, FL 32114 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: DURRANCE, THOMAS  
Address: 60 JILL ALISON CIR.  
City-St-Zip: ORMOND BEACH, FL 32176

Title: MGR  
Name: WATSON, AARON  
Address: 814 HULL ROAD  
City-St-Zip: ORMOND BEACH, FL 32174

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: THOMAS DURRANCE

MGRM

04/26/2012

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