

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000091125

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

**Entity Name:** PONCE DELEON NSB, L.L.C.

**Current Principal Place of Business:**

1801 LEE RD.  
SUITE 265  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 348  
LARGO, FL 33779

**New Mailing Address:**

**FEI Number:** 20-6905994

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPEIGEL, HOWARD A  
1801 LEE RD.  
SUITE 265  
WINTER PARK, FL 32789 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:** VOLUSIA NSB PROPERTY TRUST  
**Address:** P.O. BOX 348  
**City-St-Zip:** LARGO, FL 33779

**Title:** MGRM  
**Name:** PONCE DELEON REALTY CORP  
**Address:** 1184 STILLWOOD COURT  
**City-St-Zip:** PORT ORANGE, FL 32129

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: MICHAEL LIGUORI

MGR

04/11/2012

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