

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000029888

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

**Entity Name:** OFFICE WAREHOUSE CITY, LLC

**Current Principal Place of Business:**

2686 MIDDLE COUNTRY RD  
LAKE GROVE, NY 11755

**New Principal Place of Business:**

**Current Mailing Address:**

2686 MIDDLE COUNTRY RD  
LAKE GROVE, NY 11755

**New Mailing Address:**

**FEI Number:** 20-2702764

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEE, ROBERT A JR.  
2686 MIDDLE COUNTRY RD  
LAKE GROVE, FL 11755 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:** DIFEDE, MICHAEL A  
**Address:** 3701 CHIQUITA BLVD S  
**City-St-Zip:** CAPE CORAL, FL 33914

**Title:** MGRM  
**Name:** LEE & ASSOCIATES 006, L.L.C.  
**Address:** 3701 CHIQUITA BLVD S  
**City-St-Zip:** CAPE CORAL, FL 33914

**Title:** MGMR  
**Name:** RALJRFT  
**Address:** 2686 MIDDLE COUNTRY RD  
**City-St-Zip:** LAKE GROVE, NY 11755

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:** LEE & ASSOCIATES 006 LLC

MGRM

03/26/2012

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