

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000058745

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

**Entity Name:** ST. JOHNS PROPERTY TRADERS, LLC

**Current Principal Place of Business:**

401 WOODVIEW DR.  
LONGWOOD, FL 32779

**New Principal Place of Business:**

303 VALLEY DR  
LONGWOOD, FL 32779

**Current Mailing Address:**

PO BOX 915814  
LONGWOOD, FL 32791

**New Mailing Address:**

303 VALLEY DR  
LONGWOOD, FL 32791

**FEI Number:** 86-1143687

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SANTA CRUZ, JUAN A  
401 WOODVIEW DR.  
LONGWOOD, FL 32779 US

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

SANTA CRUZ, JUAN A  
303 VALLEY DR  
LONGWOOD, FL 32779 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:**

09/26/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** SANTA CRUZ, JUAN A  
**Address:** 303 VALLEY DR  
**City-St-Zip:** LONGWOOD, FL 32779

**Title:** MGRM  
**Name:** SANTA CRUZ, JUAN  
**Address:** HACIENDA MARGARITA #106  
**City-St-Zip:** LUQUILLO, PR 00773

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:** JUAN A SANTA CRUZ

MGRM

09/26/2012

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