

**2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Mar 23, 2012  
Secretary of State**

DOCUMENT# L05000071784

Entity Name: LEVY BRONSON PARTNERS, LLC

**Current Principal Place of Business:**

4901 WASHINGTON AVE.  
C/O HON. ALBAN I. NILES  
ORLANDO, FL 328193258

**New Principal Place of Business:**

**Current Mailing Address:**

4901 WASHINGTON AVE.  
C/O HON. ALBAN I. NILES  
ORLANDO, FL 328193258

**New Mailing Address:**

FEI Number: 72-1611966      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NILES, ALBAN I HON.  
4901 WASHINGTON AVE.  
ORLANDO, FL 328193258 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: MGR  
Name: NILES, HON. ALBAN I  
Address: 4901 WASHINGTON AVE.  
City-St-Zip: ORLANDO, FL 328193258

Title: MGR  
Name: WILLIAMS, MADELYN  
Address: 4901 WASHINGTON AVE.  
City-St-Zip: ORLANDO, FL 328193258

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: ALBAN I NILES      HON.      03/23/2012

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