

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000081047

Entity Name: AV 827, LLC

**FILED**  
**Mar 09, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1120 SS POWERLINE RD C/O CHARM CONSULTING  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

1825 MAIN STREET C/O CHARM CONSULTING  
WESTON, FL 33326

**New Mailing Address:**

FEI Number: 20-5077591

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CHARM CONSULTING, LLC  
1825 MAIN STREET C/O CHARM CONSULTING  
WESTON, FL 33326 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: CREDENTE, CRINCOLI  
Address: 1120 S POWERLINE RD C/O CHARM CONSULTING  
City-St-Zip: POMPANO BEACH, FL 33069

Title: MGRM  
Name: BASILE, MARGHERITA  
Address: 1120 S POWERLINE RD C/O CHARM CONSULTING  
City-St-Zip: POMPANO BEACH, FL 33069

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: CREDENTE CRINCOLI

MGMR

03/09/2011

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