

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000085896

Entity Name: T.A.V.A.R. PROPERTIES, LLC

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

9101 WEST COLLEGE POINTE DR.  
SUITE 1  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

9101 WEST COLLEGE POINTE DR.  
SUITE 1  
FORT MYERS, FL 33919

**New Mailing Address:**

FEI Number: 42-1697349

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CROSBIE, ALBANIA  
513 PECK AVE  
FORT MYERS, FL 33919 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: CROSBIE, ALBANIA  
Address: 513 PECK AVE  
City-St-Zip: FORT MYERS, FL 33919

Title: MGRM  
Name: CROSBIE, THOMAS  
Address: 513 PECK AVE  
City-St-Zip: FORT MYERS, FL 33919

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: ALBANIA CROSBIE

MGRM

05/01/2012

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