

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000085941

**FILED  
Apr 28, 2012  
Secretary of State**

**Entity Name:** PATRICK & SHARON CONLON, LLC

**Current Principal Place of Business:**

2011 #8 TERRACE SE  
WINTER HAVEN, FL 33880 US

**New Principal Place of Business:**

**Current Mailing Address:**  
2011 #8 TERRACE SE  
WINTER HAVEN, FL 33880 US

**New Mailing Address:**

**FEI Number:** 20-3768742      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

CONLON, SHARON  
2011 #8 TERRACE SE  
WINTER HAVEN, FL 33880 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: CONLON, SHARON  
Address: 2011 #8 TERRACE SE  
City-St-Zip: WINTER HAVEN, FL 33880 US

Title: MGRM  
Name: CONLON, PATRICK  
Address: 2011 #8 TERRACE SE  
City-St-Zip: WINTER HAVEN, FL 33880 US

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: SHARON K. CONLON

MGRM

04/28/2012

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