

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000089245

Entity Name: REVAN, L.L.C.

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7525 MEDICAL DR.  
HUDSON, FL 34667 US

**New Principal Place of Business:**

3890 TAMPA RD.  
SUITE 201  
PALM HARBOR, FL 34684 US

**Current Mailing Address:**

PO BOX 2278  
DUNEDIN, FL 346972278 US

**New Mailing Address:**

FEI Number: 20-3193036      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

BOOTHBY, CHARLES M  
7525 MEDICAL DR.  
HUDSON, FL 34667 US

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

BOOTHBY, CHARLES M  
3890 TAMPA RD/  
SUITE 201  
PALM HARBOR, FL 34684 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: \_\_\_\_\_

Electronic Signature of Registered Agent

02/07/2012

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BOOTHBY, CHARLES M  
Address: 3890 TAMPA RD. STE. 201  
City-St-Zip: PALM HARBOR, FL 34684 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: CHARLES M. BOOTHBY,D.O.

MGRM

02/07/2012

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