

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000091419

Entity Name: ESTAD, L.L.C.

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

301 E. PINE ST  
1400  
ORLANDO, FL 32801

**New Principal Place of Business:**

8616 CHICORY CT  
ORLANDO, FL 32825

**Current Mailing Address:**

PO BOX 1726  
ORLANDO, FL 32802

**New Mailing Address:**

FEI Number: 20-3761801

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SEQUAR, GHENET F MGR  
8616 CHICORY CT  
ORLANDO, FL 32825 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: MCELVANEY, SEAN  
Address: CARROWKEEL, CASTLESHANE  
City-St-Zip: CO. MONAGHAN, IRELAND, XX XX XX

Title: MGR  
Name: SEQUAR, GHENET F  
Address: 8616 CHICORY CT  
City-St-Zip: ORLANDO, FL 32825

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: SEAN MCELVANEY

MGRM

04/29/2012

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