

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000105832

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** WELLINGTON TOTAL TRUST, LLC

**Current Principal Place of Business:**

1504 FARMINGTON COURT  
WELLINGTON, FL 33414

**New Principal Place of Business:**

8400 BUSTLETON AVE.  
SUITE 204  
PHILADELPHIA, PA 19152

**Current Mailing Address:**

1504 FARMINGTON COURT  
WELLINGTON, FL 33414

**New Mailing Address:**

8400 BUSTLETON AVE.  
SUITE 204  
PHILADELPHIA, PA 19152

**FEI Number:** 20-3712433

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MIESES, LUIS M OWNER  
1504 FARMINGTON COURT  
WELLINGTON, FL 33414 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: OWNE  
Name: GRYSZKIEWICZ, PAUL  
Address: 8400 BUSTLETON AVE , SUITE 204  
City-St-Zip: PHILADELPHIA, PA 19152

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: PAUL GRYSZKIEWICZ

OWNE

04/25/2012

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