

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000045353

Entity Name: OTHER OPTIONS, L.L.C.

**FILED**  
**Feb 17, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1800 STATE ROAD 17 SOUTH  
AVON PARK, FL 33825 US

**New Principal Place of Business:**

**Current Mailing Address:**

1800 STATE ROAD 17 SOUTH  
AVON PARK, FL 33825 US

**New Mailing Address:**

FEI Number: 20-4733283

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WOHL, THOMAS J  
425 S. COMMERCE AVENUE  
SEBRING, FL 33870 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: MGR  
Name: ASHLEY, JILL P CPA  
Address: 2856 CARRIE LN  
City-St-Zip: LAKELAND, FL 33812 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: JILL P ASHLEY, CPA

MGR

02/17/2012

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