

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000045866

Entity Name: PINEAIRE, LLC

**FILED**  
**Mar 02, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1120 FLORIDA AVENUE  
# 700  
SANFORD, FL 32773

**New Principal Place of Business:**

1120 FLORIDA ST  
# 700  
SANFORD, FL 32773

**Current Mailing Address:**

P.O. BOX 950361  
LAKE MARY, FL 32795

**New Mailing Address:**

FEI Number: 56-2601959

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

AWAD, MARK  
1120 FLORIDA AVENUE  
# 700  
SANFORD, FL 32773 US

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

AWAD, MARK  
1120 FLORIDA ST  
# 700  
SANFORD, FL 32773 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

03/02/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: AWAD, MARK  
Address: PO BOX 950361  
City-St-Zip: LAKE MARY, FL 32795

Title: MGRM  
Name: AWAD, ANDREW  
Address: PO BOX 950361  
City-St-Zip: LAKE MARY, FL 32795

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: MARK AWAD

MGRM

03/02/2012

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