

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000061274

**FILED**  
**Apr 06, 2012**  
**Secretary of State**

**Entity Name:** GIORDANO ENTERPRISES, LLC

**Current Principal Place of Business:**

2636 US HIGHWAY 19  
HOLIDAY, FL 34691 US

**New Principal Place of Business:**

**Current Mailing Address:**

2636 US HIGHWAY 19  
HOLIDAY, FL 34691 US

**New Mailing Address:**

**FEI Number:** 51-0591215

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GIORDANO, MONA L  
2636 US HIGHWAY 19  
HOLIDAY, FL 34691 US

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

GIORDANO, RAMONA L  
2636 US HIGHWAY 19  
HOLIDAY, FL 34691 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:** RAMONA L GIORDANO

04/06/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** GIORDANO, RAMONA L  
**Address:** 2636 US HIGHWAY 19  
**City-St-Zip:** HOLIDAY, FL 34691 US

**Title:** MGRM  
**Name:** GIORDANO, PETER A  
**Address:** 2636 US HIGHWAY 19  
**City-St-Zip:** HOLIDAY, FL 34691

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:** RAMONA L GIORDANO

MGRM

04/06/2012

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