

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000067724

Entity Name: EBM, LLC

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2643 PROVIDENCE STREET  
FORT MYERS, FL 33916

**New Principal Place of Business:**

**Current Mailing Address:**

2643 PROVIDENCE STREET  
FORT MYERS, FL 33916

**New Mailing Address:**

FEI Number: 20-8667771

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MURPHY, BENJAMIN  
2463 PROVIDENCE STREET  
FORT MYERS, FL 33916 US

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

MURPHY, BENJAMIN  
2643 PROVIDENCE STREET  
FORT MYERS, FL 33916 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: BENJAMIN MURPHY

02/08/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: MURPHY, BENJAMIN  
Address: 2643 PROVIDENCE STREET  
City-St-Zip: FORT MYERS, FL 33916

Title: MGRM  
Name: MURPHY, VINCENT  
Address: 2643 PROVIDENCE STREET  
City-St-Zip: FORT MYERS, FL 33916

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: BENJAMIN MURPHY

RA

02/08/2012

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