

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000089585

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Entity Name:** UNITED BUILDING MANAGEMENT COMPANY, LLC

**Current Principal Place of Business:**

407 WEKIVA SPRINGS ROAD  
SUITE 100  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 915784  
LONGWOOD, FL 32791-578 US

**New Mailing Address:**

**FEI Number:** 20-5573224

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FITZPATRICK, ROBERT A  
407 WEKIVA SPRINGS ROAD  
SUITE 100  
LONGWOOD, FL 32779 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:** MGRM  
**Name:** FITZPATRICK, ROBERT A  
**Address:** 407 WEKIVA SPRINGS ROAD, SUITE 100  
**City-St-Zip:** LONGWOOD, FL 32779

**Title:** MGRM  
**Name:** FITZPATRICK, SHERRY M  
**Address:** 407 WEKIVA SPRINGS ROAD, SUITE 100  
**City-St-Zip:** LONGWOOD, FL 32779

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: ROBERT A. FITZPATRICK

MGRM

02/07/2012

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