

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000113641

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** SHEARSON FINANCIAL SERVICES, LLC

**Current Principal Place of Business:**

7000 W. PALMETTO PARK RD.  
SUITE 306  
BOCA RATON, FL 33433

**New Principal Place of Business:**

**Current Mailing Address:**

7000 W. PALMETTO PARK RD.  
SUITE 306  
BOCA RATON, FL 33433

**New Mailing Address:**

**FEI Number:** 11-3229526

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KAPLAN, JED  
17729 MIDDLE BROOK WAY  
BOCA RATON, FL 33496 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:** CEO  
**Name:** KAPLAN, JED P  
**Address:** 17729 MIDDLEBROOK WAY  
**City-St-Zip:** BOCA RATON, FL 33496

**Title:** MD  
**Name:** GROSSMAN, STEVEN  
**Address:** 7000 W. PALMETTO PARK RD  
**City-St-Zip:** BOCA RATON, FL 33433

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:** JED KAPLAN

CEO

01/05/2012

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