

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000000406

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

**Entity Name:** REYNOLDS & REYNOLDS, P.L.

**Current Principal Place of Business:**

120 S. OLIVE AVE.  
SUITE 120  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

120 S. OLIVE AVE.  
SUITE 401  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

120 S. OLIVE AVE.  
SUITE 120  
WEST PALM BEACH, FL 33401

**New Mailing Address:**

120 S. OLIVE AVE.  
SUITE 401  
WEST PALM BEACH, FL 33401

**FEI Number:** 84-1723319

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

REYNOLDS, JOHN H  
120 S. OLIVE AVE.  
SUITE 401  
WEST PALM BEACH, FL 33401 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: MGR.  
Name: REYNOLDS, JOHN H  
Address: 120 S. OLIVE AVE., SUITE 401  
City-St-Zip: WEST PALM BEACH, FL 33401

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: JOHN H. REYNOLDS, ESQ.

MGR.

02/07/2012

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