## 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000008454

Entity Name: PLAN B FAMILY INVESTMENTS, LLC

FILED Jan 04, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

304 KINGSLEY LAKE DRIVE 109 NATURE WALK PARKWAY

SUITE 601 SUITE 107

ST. AUGUSTINE, FL 32092 ST. AUGUSTINE, FL 32092

Current Mailing Address: New Mailing Address:

304 KINGSLEY LAKE DRIVE 109 NATURE WALK PARKWAY

SUITE 601 SUITE 107

ST. AUGUSTINE, FL 32092 ST. AUGUSTINE, FL 32092

FEI Number: 20-8291553 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GRIFFIN, ILISA GRIFFIN, ILISA

304 KINGSLEY LAKE DRIVE 109 NATURE WALK PARKWAY

SUITE 601 SUITE 107

SAINT AUGUSTINE, FL 32092 US SAINT AUGUSTINE, FL 32092 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: ILISA GRIFFIN 01/04/2012

Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM

Name: VESPI, ANGELO

Address: 109 NATURE WALK PARKWAY, SUITE 107

City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: MGRM

Name: VESPI, JENNIFER

Address: 109 NATURE WALK PARKWAY, SUITE 107

City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGRM

Name: GRIFFIN, BRUCE

Address: 109 NATURE WALK PARKWAY, SUITE 107

City-St-Zip: ST. AUGUSTINE, FL 32092

Title: MGRM Name: GRIFFIN, LISA

Address: 109 NATURE WALK PARKWAY, SUITE 107

City-St-Zip: ST. AUGUSTINE, FL 32092

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 Statues.

SIGNATURE: ILISA GRIFFIN MGR 01/04/2012