

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000033042

**FILED**  
**Apr 16, 2012**  
**Secretary of State**

**Entity Name:** RAUL OCAMPO AND ASSOCIATES, LLC

**Current Principal Place of Business:**

417 SW CALIFORNIA AVE  
STUART, FL 34994

**New Principal Place of Business:**

**Current Mailing Address:**

417 SW CALIFORNIA AVE  
STUART, FL 34994

**New Mailing Address:**

**FEI Number:** 26-2343286

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CANTOR, SAMUEL J  
2499 GLADES ROAD #210  
BOCA RATON, FL 33431 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: OCAMPO, RAUL  
Address: 417 SW CALIFORNIA AVE  
City-St-Zip: STUART, FL 34994

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: RAUL OCAMPO, JR.

MGRM

04/16/2012

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