

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000048227

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

**Entity Name:** BERING HOMES, LLC

**Current Principal Place of Business:**

509 GUI SANDO DE AVILA, SUITE 200  
TAMPA, FL 33613

**New Principal Place of Business:**

3414 W. BAY TO BAY BLVD  
300  
TAMPA, FL 33629

**Current Mailing Address:**

PO BOX 18082  
TAMPA, FL 33679

**New Mailing Address:**

**FEI Number:** 26-0164642

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HENDERSON, THOMAS N III  
101 EAST KENNEDY BOULEVARD, SUITE 3700  
TAMPA, FL 33602 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:** O'BRIEN, MARK J  
**Address:** PO BOX 18082  
**City-St-Zip:** TAMPA, FL 33679

**Title:** P  
**Name:** O'BRIEN, CHAD R  
**Address:** PO BOX 18082  
**City-St-Zip:** TAMPA, FL 33679

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: CHAD O'BRIEN

P

04/05/2012

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