

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000084058

**FILED**  
**Mar 23, 2012**  
**Secretary of State**

**Entity Name:** 8804 66TH STREET NORTH, LLC

**Current Principal Place of Business:**

1 ASPEN DR  
85  
LOVELAND, CO 80538

**New Principal Place of Business:**

2225 NURSERY ROAD  
LEASING CENTER  
CLEARWATER, FL 33764 UN

**Current Mailing Address:**

1 ASPEN DR  
85  
LOVELAND, CO 80538

**New Mailing Address:**

2225 NURSERY ROAD  
LEASING CENTER  
CLEARWATER, FL 33764 UN

**FEI Number:** 26-0750309

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCHROEDER, STEVEN A  
2225 NURSERY RD  
LEASING OFFICE  
CLEARWATER, FL 33764 US

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

MIKOLAJCZYK, KIM C  
2225 NURSERY RD  
LEASING OFFICE  
CLEARWATER, FL 33764 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: KIM C MIKOLAJCZYK

03/23/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SCHROEDER, STEVE  
Address: 2225 NURSERY ROAD-LEASING CENTER  
City-St-Zip: CLEARWATER, FL 33764 UN

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: STEVEN A SCHROEDER

MGRM

03/23/2012

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