

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000096996

**FILED**  
**Apr 18, 2012**  
**Secretary of State**

**Entity Name:** LIQUID ASSETS OF TWIN LAKES WEST, LLC

**Current Principal Place of Business:**

806 SHRIVER CIRCLE  
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

PMB 429, UNIT 104  
4044 WEST LAKE MARY BLVD.  
LAKE MARY, FL 327462012

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

KELLEY, CHRISTOPHER E  
806 SHRIVER CIRCLE  
LAKE MARY, FL 32746 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: KELLEY, CHRISTOPHER E  
Address: PMB 429, UNIT #104, 4044 W. LAKE MARY BLVD  
City-St-Zip: LAKE MARY, FL 32746 US

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: CHRISTOPHER E. KELLEY

MGRM

04/18/2012

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