

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000104483

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** DANCANKO FRACTIONALLIST LLC

**Current Principal Place of Business:**

PMB #335 3152 LITTLE ROAD  
TRINITY, FL 346551864

**New Principal Place of Business:**

8403 BALM STREET  
WEEKI WACHEE, FL 34607 US

**Current Mailing Address:**

PMB #335 3152 LITTLE ROAD  
TRINITY, FL 346551864

**New Mailing Address:**

PMB #335 3152 LITTLE ROAD  
TRINITY, FL 34655 US

**FEI Number:** 30-0638035

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LARYEA, DANIYAL K  
8403 BALM STREET  
WEEKI WACHEE, FL 34607 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:** KONEY, CANDACE  
**Address:** PMB #335 3152 LITTLE ROAD  
**City-St-Zip:** TRINITY, FL 346551864

**Title:** MGRM  
**Name:** KONEY, DANIYAL  
**Address:** PMB #335 3152 LITTLE ROAD  
**City-St-Zip:** TRINITY, FL 346551864

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:** CANDICE KONEY-LARYEA

MD

04/30/2012

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