

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L07000121728

**FILED**  
**Nov 30, 2011**  
**Secretary of State**

**Entity Name:** 979 OLD POST ROAD, LLC

**Current Principal Place of Business:**

C/O KEN SLATER  
11 SLOAN'S CURVE DRIVE, #11  
PALM BEACH, FL 33480 US

**New Principal Place of Business:**

**Current Mailing Address:**

11 SLOAN'S CURVE DRIVE, #11  
PALM BEACH, FL 33480  
PALM BEACH, FL 33480 US

**New Mailing Address:**

**FEI Number:** 26-1527085

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GY CORPORATE SERVICES, INC.  
777 SOUTH FLAGLER DRIVE, STE. 500 EAST  
WEST PALM BEACH, FL 33401 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: MGR  
Name: TREMONT ASSET MANAGEMENT, LLC  
Address: 10 TREMONT STREET, 5TH FLOOR  
City-St-Zip: BOSTON, MA 02108 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: SAMUEL H. SLATER

M

11/30/2011

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