

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000021605

Entity Name: MAPFLORIDA, LLC

**FILED**  
**Jun 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

945 BRUSH HILL RD.  
MILTON, MA 02186

**New Principal Place of Business:**

**Current Mailing Address:**

945 BRUSH HILL RD.  
MILTON, MA 02186

**New Mailing Address:**

FEI Number: 26-2133897

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LIEBERMAN, ERIK R  
227 NOKOMIS AVENUE S  
VENICE, FL 34285 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: VOKE, JOY  
Address: 945 BRUSH HILL RD.  
City-St-Zip: MILTON, MA 02186

Title: MGR  
Name: PROCACCINO, MARY A  
Address: 811 THE ESPLANADE N, SUITE 701  
City-St-Zip: VENICE, FL 34285

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: JOY E VOKE

MGR

06/11/2012

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