

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000027501

Entity Name: CHORION, LLC

**FILED**  
**Aug 22, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2143 SYCAMORE DRIVE  
WINTER PARK, FL 347896658 US

**New Principal Place of Business:**

4987 MAPLE GLEN PLACE  
SANFORD, FL 3277166 US

**Current Mailing Address:**

2143 SYCAMORE DRIVE  
WINTER PARK, FL 347896658 US

**New Mailing Address:**

4987 MAPLE GLEN PLACE  
SANFORD, FL 3277166 US

FEI Number: 26-2187371

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

POLACHEK, STEPHEN J  
2143 SYCAMORE DRIVE  
WINTER PARK, FL 347696658 US

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

POLACHEK, STEPHEN J  
4987 MAPLE GLEN PLACE  
SANFORD, FL 3277166 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:

08/22/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: POLACHEK, STEPHEN J  
Address: 4987 MAPLE GLEN PLACE  
City-St-Zip: SANFORD, FL 32771 66

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: STEPHEN J POLACHEK

MGRM

08/22/2012

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