

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000052260

**FILED**  
**Jan 19, 2012**  
**Secretary of State**

**Entity Name:** BORUM & ASSOCIATES L.L.C.

**Current Principal Place of Business:**

5110 SOUTH FLORIDA AVENUE  
SUITE 105  
LAKELAND, FL 33813

**New Principal Place of Business:**

**Current Mailing Address:**

5110 SOUTH FLORIDA AVENUE  
SUITE 105  
LAKELAND, FL 33813

**New Mailing Address:**

**FEI Number:** 26-2699578

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BORUM, JULIA M  
5110 S. FLORIDA AVENUE  
SUITE 105  
LAKELAND, FL 33813 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:** BORUM, JULIA M  
**Address:** 5110 SOUTH FLORIDA AVENUE  
**City-St-Zip:** LAKELAND, FL 33813 US

**Title:** MGRM  
**Name:** BORUM, JEROME P  
**Address:** 425 ARCHAIC DR.  
**City-St-Zip:** WINTER HAVEN, FL 33880 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: JULIA M. BORUM

MGR

01/19/2012

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