

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000055156

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

**Entity Name:** THE PROPER PIE COMPANY LLC

**Current Principal Place of Business:**

145 RIDGE CENTER DRIVE  
TRUE  
DAVENPORT, FL 33837 US

**New Principal Place of Business:**

145 RIDGE CENTER DRIVE  
145  
DAVENPORT, FL 33837 US

**Current Mailing Address:**

145 RIDGE CENTER DRIVE  
TRUE  
DAVENPORT, FL 33837 US

**New Mailing Address:**

145 RIDGE CENTER DRIVE  
145  
DAVENPORT, FL 33837 US

**FEI Number:** 33-1217001

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GIBSON, BEVERLEY A  
145 RIDGE CENTER DRIVE  
TRUE  
DAVENPORT, FL 33837 US

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

GIBSON, BEVERLEY A  
145 RIDGE CENTER DRIVE  
145  
DAVENPORT, FL 33837 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: D GIBSON

03/22/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GIBSON, BEVERLEY A  
Address: 1446 PARK PLACE  
City-St-Zip: HAINES CITY, FL 33844 US

Title: MGRM  
Name: GIBSON, DEREK L  
Address: 1446 PARK PLACE  
City-St-Zip: HAINES CITY, FL 33844 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: D GIBSON

MR

03/22/2012

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