

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000061760

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** CONNORS FAMILY OF BONITA SPRINGS LLC

**Current Principal Place of Business:**

25248 PELICAN CREEK CIRCLE, UNIT 202  
BONITA SPRINGS, FL 34134

**New Principal Place of Business:**

25248 PELICAN CREEK CIRCLE, UNIT 202  
BONITA SPRINGS, FL 34134 US

**Current Mailing Address:**

25248 PELICAN CREEK CIRCLE, UNIT 202  
BONITA SPRINGS, FL 34134

**New Mailing Address:**

25248 PELICAN CREEK CIRCLE, UNIT 202  
BONITA SPRINGS, FL 34134 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

CONNORS, SUSAN J  
25248 PELICAN CREEK CIRCLE #202  
BONITA SPRINGS, FL 34134 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: MGRM  
Name: SUSAN J. CONNORS REVOCABLE TRUST, 10/13/99  
Address: 25248 PELICAN CREEK CIRCLE, UNIT 202  
City-St-Zip: BONITA SPRINGS, FL 34134

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: SUSAN J. CONNORS

RA

01/04/2012

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