

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000065505

**Entity Name:** PATTI KEEFE CST/CFA, LLC

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

**Current Principal Place of Business:**

353 CEDARBROOK LANE  
ALTAMONTE SPRINGS, FL 32714 US

**New Principal Place of Business:**

**Current Mailing Address:**

353 CEDARBROOK LANE  
ALTAMONTE SPRINGS, FL 32714 US

**New Mailing Address:**

**FEI Number:** 26-2935507

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KEEFE, PATTI  
353 CEDARBROOK LANE  
ALTAMONTE SPRINGS, FL 32714 US

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

KEEFE, PATTI K MS.  
353 CEDARBROOK LANE  
ALTAMONTE SPRINGS, FL 32714 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: PATTI KEEFE CST/CFA LLC

01/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: KEEFE, PATTI K MS.  
Address: 353 CEDARBROOK LANE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714 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: PATTI KEEFE CST/CFA LLC

MNGR

01/04/2012

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