

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000073518

**FILED**  
**Apr 14, 2012**  
**Secretary of State**

**Entity Name:** LEE BATES LLC

**Current Principal Place of Business:**

24907 NW BATES ROAD  
ALTHA, FL 32421

**New Principal Place of Business:**

24907 NW BATES ROAD  
ALTHA, FL 32421 UN

**Current Mailing Address:**

24907 NW BATES ROAD  
ALTHA, FL 32421

**New Mailing Address:**

**FEI Number:** 26-3046976      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BATES, LEE  
24907 NW BATES ROAD  
ALTHA, FL 32421 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:** BATES, LEE  
**Address:** 24907 NW BATES ROAD  
**City-St-Zip:** ALTHA, FL 32421

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: LEE BATES

MGRM

04/14/2012

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