

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000097270

FILED
Apr 05, 2012
Secretary of State

Entity Name: PASS PROGRAM SOUTH, LLC

Current Principal Place of Business:

120 SEAGROVE MAIN STREET
ST. AUGUSTINE, FL 32080 US

New Principal Place of Business:

Current Mailing Address:

120 SEAGROVE MAIN STREET
ST. AUGUSTINE, FL 32080 US

New Mailing Address:

FEI Number: 26-3550724

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: D
Name: WOLF MD, HANS MD
Address: 120 SEAGROVE MAIN STREET
City-St-Zip: ST. AUGUSTINE, FL 32080

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: HANS P WOLF MD

MGRM

04/05/2012

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