2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 08, 2012
Secretary of State

DOCUMENT# L08000113570

Entity Name: KAREN B. FATTOROSI PHD LCSW LLC

Current Principal Place of Business:

1294 SE 24 ROAD
OCALA, FL 34471

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6066
OCALA, FL 34478

New Mailing Address:

FEI Number: 22-3824587 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FATTOROSI, KAREN B
1294 SE 24 ROAD
OCALA, FL 34471 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: MGR
Name: FATTOROSI, KAREN B
Address: 1294 SE 24 ROAD
City-St-Zip: OCALA, FL 34471

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 Statues.

SIGNATURE: KAREN FATTOROSI MGR 04/08/2012

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