

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000029129

Entity Name: SANTORINI CAGE, LLC

**FILED**  
**Mar 06, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

11621 KEW GARDENS AVENUE  
SUITE 109  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

11621 KEW GARDENS AVENUE  
SUITE 109  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

THEOFILOS, KATHRYN K  
11621 KEW GARDENS AVENUE, SUITE 109  
PALM BEACH GARDENS, FL 33410 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: THEOFILOS, KATHRYN K  
Address: 11621 KEW GARDENS AVENUE, SUITE 109  
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: KATHRYN K THEOFILOS

MGR

03/06/2012

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