

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000082615

Entity Name: 540 PAD LLC

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

540 EAST MCNAB RD  
#E  
CORAL SPRINGS, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

540 EAST MCNAB RD  
#E  
CORAL SPRINGS, FL 33060

**New Mailing Address:**

FEI Number: 27-1154438

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DESENZE, PHILIP S  
540 EAST MCNAB RD  
#E  
CORAL SPRINGS, FL 33060 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: DESENZE, PHILIP S  
Address: 5956 NW 126 TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: MGRM  
Name: DESENZE, ANNA  
Address: 5956 NW 126 TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33076

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: PHILIP S DESENZE

MGRM

04/30/2012

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