

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000098544

**FILED**  
**May 03, 2012**  
**Secretary of State**

**Entity Name:** P.K. STEVENS GROUP, LLC

**Current Principal Place of Business:**

39650 US 19 NORTH  
THE WOODS # 423  
TARPON SPRINGS, FL 34689

**New Principal Place of Business:**

**Current Mailing Address:**

39650 US 19 NORTH  
THE WOODS # 423  
TARPON SPRINGS, FL 34689

**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:**

STEVENS, PAUL  
39650 US 19 NORTH  
THE WOODS # 423  
TARPON SPRINGS, FL 34689 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: STEVENS, PAUL  
Address: 39650 US 19 NORTH, THE WOODS # 423  
City-St-Zip: TARPON SPRINGS, FL 34689

Title: MGRM  
Name: STEVENS, KAREN A  
Address: 39650 US 19 NORTH, THE WOODS # 423  
City-St-Zip: TARPON SPRINGS, FL 34689

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: PAUL STEVENS

MGRM

05/03/2012

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