

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000099594

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

**Entity Name:** FAFF LLC

**Current Principal Place of Business:**

324 BUTTONWOOD LANE  
LARGO, FL 33770 US

**New Principal Place of Business:**

**Current Mailing Address:**

324 BUTTONWOOD LANE  
LARGO, FL 33770 US

**New Mailing Address:**

**FEI Number:** 27-1119791

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HL STATUTORY AGENT, INC  
800 LAUREL OAK DRIVE  
SUITE 600  
NAPLES, FL 34108 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:** SEZIONALE, EDOUARD M  
**Address:** 324 BUTTONWOOD LANE  
**City-St-Zip:** LARGO, FL 33770 US

**Title:** MGRM  
**Name:** SEZIONALE, CAROLINE E  
**Address:** 324 BUTTONWOOD LANE  
**City-St-Zip:** LARGO, FL 33770 US

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:** BRAD A. GALBRAITH

ATTY

04/03/2012

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