

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000003077

Entity Name: SARA J CHRISMAN LLC

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

210 LANYARD PL  
LEHIGH ACRES, FL 33936

**New Principal Place of Business:**

528 FRANK JEWETT AV S  
LEHIGH ACRES, FL 33974

**Current Mailing Address:**

210 LANYARD PL  
LEHIGH ACRES, FL 33936

**New Mailing Address:**

528 FRANK JEWETT AV S  
LEHIGH ACRES, FL 33974

FEI Number: 27-1628591

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CHRISMAN, SARA J  
210 LANYARD PL  
LEHIGH ACRES, FL 33936 US

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

CHRISMAN, SARA J  
528 FRANK JEWETT AV S  
LEHIGH ACRES, FL 339374 US

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: SARA J CHRISMAN

01/04/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CHRISMAN, SARA J  
Address: 528 FRANK JEWETT AV S  
City-St-Zip: LEHIGH ACRES, FL 33974

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: SARA J CHRISMAN

MGRM

01/04/2012

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