

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000019569

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

**Entity Name:** TERCES INVESTMENTS, LLC

**Current Principal Place of Business:**

4206 METRON  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

4206 METRON DR  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

PO BOX 550816  
JACKSONVILLE, FL 32255

**New Mailing Address:**

PO BOX 550816  
JACKSONVILLE, FL 32255 08

**FEI Number:** 27-1958832

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

NEWMARK, BRUCE  
4206 METRON  
JACKSONVILLE, FL 32216 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:** JASBOR  
**Address:** 4206 METRON  
**City-St-Zip:** JACKSONVILLE, FL 32216

**Title:** MGR  
**Name:** NEWMARK, BRUCE  
**Address:** 4206 METRON  
**City-St-Zip:** JACKSONVILLE, FL 32216

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:** BRUCE E. NEWMARK

MR

01/04/2012

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