

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000021418

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** ANNEZE BROWN CONSULTING, LLC

**Current Principal Place of Business:**

4055 NW 17TH AVE  
MIAMI, FL 33142

**New Principal Place of Business:**

4798 NW 6TH COURT  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

4798 NW 6TH CT  
DELRAY BEACH, FL 33445

**New Mailing Address:**

4798 NW 6TH COURT  
DELRAY BEACH, FL 33445

**FEI Number:** 36-4674073

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BROWN, ANNEZE  
4798 NW 6TH CT  
DELRAY BCH, FL 33445 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:** BROWN, ANNEZE  
**Address:** 4798 NW 6TH CT  
**City-St-Zip:** DELRAY BEACH, FL 33445

**Title:** MGRM  
**Name:** BATHELEMY, EDWIN  
**Address:** 341 SOUTHRIDGE ROAD  
**City-St-Zip:** DELRAY BEACH, FL 33444

**Title:** ADM.  
**Name:** BATHELEMY, CHARMINE  
**Address:** 4798 NW 6TH CT  
**City-St-Zip:** MIAMI, FL 33445

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:** ABROWN

MGR

05/01/2012

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