

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000031574

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

**Entity Name:** EMPOWERMENT CONSORTIUM L.L.C.

**Current Principal Place of Business:**

9352 NUGENT TRAIL  
WEST PALM BEACH, FL 33411 UN

**New Principal Place of Business:**

**Current Mailing Address:**

9352 NUGENT TRAIL  
WEST PALM BEACH, FL 33411 UN

**New Mailing Address:**

**FEI Number:** 27-1922717      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

DARRISAW, HUBERT S  
9352 NUGENT TRAIL  
WEST PALM BEACH, FL 33411 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:** DARRISAW, HUBERT S  
**Address:** 9352 NUGENT TRAIL  
**City-St-Zip:** WEST PALM BEACH, FL 33411 UN

**Title:** MGRM  
**Name:** LITTLE, JOHN A  
**Address:** 2994 LAKEWOOD LANE  
**City-St-Zip:** HOLLYWOOD, FL 33021 UN

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:** HUBERT S. DARRISAW

MR

05/01/2012

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