

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000050348

**FILED**  
**Apr 02, 2012**  
**Secretary of State**

**Entity Name:** STEPPEN & SPAULDING, LLC

**Current Principal Place of Business:**

2659 NE 35 ST  
BOX 53  
OCALA, FL 34479 US

**New Principal Place of Business:**

**Current Mailing Address:**

2659 NE 35 ST  
BOX 53  
OCALA, FL 34479 US

**New Mailing Address:**

**FEI Number:** 27-2543434

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPAULDING, DAN  
3801 NE 28 TERR  
OCALA, FL 34479 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:** SPAULDING, DAN  
**Address:** 3801 NE 28 TERR  
**City-St-Zip:** OCALA, FL 34479 US

**Title:** MGRM  
**Name:** STEPPEN, THOMAS  
**Address:** 3245 SW 46 AVE  
**City-St-Zip:** OCALA, FL 34474 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:** DAN SPAULDING

MGMR

04/02/2012

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