

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000050570

FILED  
Apr 10, 2012  
Secretary of State

**Entity Name:** TROLL PROPERTIES, LLC

**Current Principal Place of Business:**

525 SO. MAGNOLIA AVE  
ORLANDO, FL 32801

**New Principal Place of Business:**

**Current Mailing Address:**

525 SO. MAGNOLIA AVE  
ORLANDO, FL 32801

**New Mailing Address:**

**FEI Number:** 27-2558747

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SNOW, STEPHEN P M.D.  
525 SO. MAGNOLIA AVE  
ORLANDO, FL 32801 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:** SNOW, STEPHEN P M.D.  
**Address:** 4070 SCARLET IRIS PLACE  
**City-St-Zip:** WINTER PARK, FL 32792

**Title:** MGRM  
**Name:** SNOW, KIMBERLY B  
**Address:** 4070 SCARLET IRIS PLACE  
**City-St-Zip:** WINTER PARK, FL 32792

**Title:** MGRM  
**Name:** THATCHER-LEMONIE, PARMELEE M.D.  
**Address:** 1653 CONWAY ISLE CIRCLE  
**City-St-Zip:** ORLANDO, FL 32809

**Title:** MGRM  
**Name:** LEMONIE, JASON E M.D.  
**Address:** 1653 CONWAY ISLE CIRCLE  
**City-St-Zip:** ORLANDO, FL 32809

**Title:** MGRM  
**Name:** FRITZ-CHONG, EMMA M.D.  
**Address:** 830 W. YATES STREET  
**City-St-Zip:** ORLANDO, FL 32804

**Title:** MGRM  
**Name:** CHONG, ROBERT H M.D.  
**Address:** 830 W. YATES STREET  
**City-St-Zip:** ORLANDO, FL 32804

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: STEPHEN P SNOW MD

MGRM

04/10/2012

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