## 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L10000067990

Entity Name: PREPAY PARTNERS, LLC

FILED Jan 26, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3801 NORTH HIGHWAY 19A SUITE 400

MOUNT DORA, FL 32757

Current Mailing Address: New Mailing Address:

3801 NORTH HIGHWAY 19A SUITE 400 MOUNT DORA, FL 32757

FEI Number: 45-1448588 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RICHARD S. BERGHOLTZ, P.A. 3747 LAKE CENTER DRIVE MOUNT DORA, FL 32757 US

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:
 ASCLEPIUS RKT, LLC

 Address:
 3801 NORTH HIGHWAY 19A

 City-St-Zip:
 MOUNT DORA, FL 32757

Title: MGRM

Name: VANNE ENTERPRISES, INC.
Address: 440 CHINA HILL COURT
City-St-Zip: APOPKA, FL 32712

Title: MGRM

Name: PABLO REYES & BERNADETTE SANTOS MD TENANTS

Address: 121 LAGRANDE BLVD., STE. A

City-St-Zip: LADY LAKE, FL 32159

Title: MGRM

Name: SOUTHERN TIMBER VENTURES, LLC

Address: 7750 E. MISTY LANE
City-St-Zip: INVERNESS, FL 34450

Title: MGRM

Name: KANSAS FAMILY LIMITED PARTNERSHIP

Address: 5640 SPINNAKER LOOP City-St-Zip: LADY LAKE, FL 32159

Title: MGRM

Name: LADY LAKE RODRIGUEZ-CORTEZA, LLC

Address: 1700 BENTLEY ROAD City-St-Zip: LEESBURG, FL 34748

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 Statues.

SIGNATURE: RUTH MENESES-TAYLOR M.D. MGRM 01/26/2012

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