

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000087050

Entity Name: SONOMA 402, LLC

**FILED**  
**Mar 15, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1489 GREYFIELD DR.  
SAINT AUGUSTINE, FL 32092 US

**New Principal Place of Business:**

**Current Mailing Address:**

1489 GREYFIELD DR.  
SAINT AUGUSTINE, FL 32092 US

**New Mailing Address:**

FEI Number: 27-3262247

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCHILLO, WAYNE  
1489 GREYFIELD DR.  
SAINT AUGUSTINE, FL 32092 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: SCHILLO, WAYNE  
Address: 1489 GREYFIELD DR.  
City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: MGRM  
Name: WILLIAMS, BRIAN  
Address: 36 RYMEN LN  
City-St-Zip: PALM COAST, FL 32164 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: WAYNE SCHILLO

MGRM

03/15/2012

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