

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000100886

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** 150 NW 18TH AVENUE, LLC

**Current Principal Place of Business:**

150 NW 18TH AVE  
DELRAY, FL 33344

**New Principal Place of Business:**

**Current Mailing Address:**

158 OAKWOOD LANE  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

PO BOX 6636  
DELRAY BEACH, FL 33482

**FEI Number:** 27-5155503

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAIZ, ANN  
158 OAKWOOD LANE  
PALM BEACH GARDENS, FL 33410 US

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

SAIZ, ANN  
150 NW 18TH AVE  
DELRAY BEACH, FL 33483 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:

02/09/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PRES  
Name: SAIZ, ANN  
Address: PO BOX 6636  
City-St-Zip: DELRAY BEACH, FL 33482

Title: VP  
Name: HANSBURY, THOMAS  
Address: PO BOX 6636  
City-St-Zip: DELRAY BEACH, FL 33482

Title: VP  
Name: SAIZ, ALAN  
Address: PO BOX 6636  
City-St-Zip: DELRAY BEACH, FL 33482

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: ANN SAIZ

PRES

02/09/2012

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