

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000000262

Entity Name: LL COUNSELING, LLC

**FILED**  
**Mar 29, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

661 SEMINOLA BLVD  
CASSELBERRY, FL 32707 US

**New Principal Place of Business:**

212 W BAY AVE  
LONGWOOD, FL 32750 US

**Current Mailing Address:**

661 SEMINOLA BLVD  
CASSELBERRY, FL 32707 US

**New Mailing Address:**

212 W BAY AVE  
LONGWOOD, FL 32750 US

FEI Number: 27-4395215

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LAURIDSEN, LORI L  
661 SEMINOLA BLVD  
CASSELBERRY, FL 32707 US

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

LAURIDSEN, LORI L  
212 W BAY AVE  
LONGWOOD, FL 32750 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: LORI LAURIDSEN

03/29/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LAURIDSEN, LORI L  
Address: 212 W BAY AVE  
City-St-Zip: LONGWOOD, FL 32750 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: LORI LAURIDSEN

MNGR

03/29/2012

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