

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000013512

Entity Name: FAKE PROBLEMS LLC

**FILED**  
**Apr 19, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1111 STREET ROAD  
SOUTHAMPTON, PA 18966 US

**New Principal Place of Business:**

**Current Mailing Address:**

1111 STREET ROAD  
SOUTHAMPTON, PA 18966 US

**New Mailing Address:**

95 ALMSHOUSE RD  
STE 306  
RICHBORO, PA 18954 US

FEI Number: 27-5011740

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAK COURT  
SUITE A  
TAMPA, FL 33612 US

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

FARREN, CHRISTOPHER  
1105 RESERVE CT.  
APT 106  
NAPLES, FL 34105 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: CHRISTOPHER FARREN

04/19/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FARREN, CHRISTOPHER  
Address: 1111 STREET ROAD  
City-St-Zip: SOUTHAMPTON, PA 18966 US

Title: MGRM  
Name: STEVENSON, SEAN  
Address: 1111 STREET ROAD  
City-St-Zip: SOUTHAMPTON, PA 18966 US

Title: MGRM  
Name: LEE, CASEY  
Address: 1111 STREET ROAD  
City-St-Zip: SOUTHAMPTON, PA 18966 US

Title: MGRM  
Name: PERRY, DEREK  
Address: 1111 STREET ROAD  
City-St-Zip: SOUTHAMPTON, PA 18966 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: CHRISTOPHER FARREN

MGRM

04/19/2012

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