

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000019918

Entity Name: EXTEND & MEND LLC

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

1321 SE 8TH AVENUE  
2  
CAPE CORAL, FL 33990 US

**New Principal Place of Business:**

1331 SW 4TH AVENUE  
CAPE CORAL, FL 33991 US

**Current Mailing Address:**

1321 SE 8TH AVENUE  
2  
CAPE CORAL, FL 33990 US

**New Mailing Address:**

1331 SW 4TH AVENUE  
CAPE CORAL, FL 33991 US

FEI Number: 27-4862752

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LEMONAKIS, CHRISTA M  
1321 SE 8TH AVENUE  
2  
CAPE CORAL, FL 33990 US

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

LEMONAKIS, CHRISTA M  
1331 SW 4TH AVE  
CAPE CORAL, FL 33991 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: CHRISTA LEMONAKIS

04/11/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: EXTEND & MEND LLC  
Address: 1331 SW 4TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33991 US

Title: MGR  
Name: LEMONAKIS, CHRISTA M  
Address: 1331 SW 4TH AVENUE  
City-St-Zip: CAPE CORAL, FL 33991 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: CHRISTA LEMONAKIS

MS

04/11/2012

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