

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000021846

**FILED**  
**Mar 07, 2012**  
**Secretary of State**

**Entity Name:** EST FAD LLC

**Current Principal Place of Business:**

424 4TH AVE  
INDIALANTIC, FL 32903

**New Principal Place of Business:**

**Current Mailing Address:**

424 4TH AVE  
INDIALANTIC, FL 32903

**New Mailing Address:**

**FEI Number:** 27-5217140

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FADDEN, B.J.  
424 4TH AVE  
INDIALANTIC, FL 32903 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:** ESTILL, ALEX  
**Address:** 2108 CHAINBRIDGE CT  
**City-St-Zip:** CROFTON, MD 21114

**Title:** MGRM  
**Name:** FADDEN, B.J.  
**Address:** 424 4TH AVE  
**City-St-Zip:** INDIALANTIC, FL 32903

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:** B.J. FADDEN

MGRM

03/07/2012

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