

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000034423

**FILED**  
**Apr 23, 2012**  
**Secretary of State**

**Entity Name:** ALL SAINTS PARTNERS LLC

**Current Principal Place of Business:**

1700 N MONROE STREET, SUITE 11-151  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

**Current Mailing Address:**

1700 N MONROE STREET, SUITE 11-151  
TALLAHASSEE, FL 32303

**New Mailing Address:**

**FEI Number:** 61-1679875

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KENT, NICHOLAS  
1700 N MONROE STREET, SUITE 11-151  
TALLAHASSEE, FL 32303 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:** KENT, NICHOLAS  
**Address:** 1700 N MONROE STREET, SUITE 11-151  
**City-St-Zip:** TALLAHASSEE, FL 32303

**Title:** MGRM  
**Name:** COREY, ADAM B  
**Address:** 713 SE 16TH ST #6  
**City-St-Zip:** FT LAUDERDALE, FL 33316

**Title:** MGRM  
**Name:** LOHBECK, STEVEN  
**Address:** 1306 MLK BLVD  
**City-St-Zip:** TALLAHASSEE, FL 32303

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:** NICHOLAS KENT

MGRM

04/23/2012

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