

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000034605

**FILED**  
**Aug 30, 2012**  
**Secretary of State**

**Entity Name:** PARALLAX QUANTITATIVE ASSET MANAGEMENT, LLC

**Current Principal Place of Business:**

26115 FAWNWOOD COURT  
BONITA SPRINGS, FL 34134 US

**New Principal Place of Business:**

1347 MARSH HARBOR DRIVE  
JACKSONVILLE, FL 32225 US

**Current Mailing Address:**

26115 FAWNWOOD COURT  
BONITA SPRINGS, FL 34134 US

**New Mailing Address:**

1347 MARSH HARBOR DRIVE  
JACKSONVILLE, FL 32225 US

**FEI Number:** 45-2903824

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEIGH, LOMMEN E  
26115 FAWNWOOD COURT  
BONITA SPRINGS, FL 34134 US

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

LEIGH, LOMMEN E  
1347 MARSH HARBOR DRIVE  
JACKSONVILLE, FL 32225 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: LEIGH LOMMEN

08/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: LOMMEN, LEIGH E  
Address: 1347 MARSH HARBOR DRIVE  
City-St-Zip: JACKSONVILLE, FL 32225 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: LEIGH LOMMEN

CIO

08/30/2012

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