

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000061008

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** LABONTE MANAGEMENT AND CONSULTING LLC

**Current Principal Place of Business:**

51 CAYUGA ROAD  
SEA RANCH LAKES, FLORIDA, 33308

**New Principal Place of Business:**

51 CAYUGA ROAD  
SEA RANCH LAKES, FL 33308

**Current Mailing Address:**

51 CAYUGA ROAD  
SEA RANCH LAKES, FLORIDA, 33308

**New Mailing Address:**

51 CAYUGA ROAD  
SEA RANCH LAKES, FL 33308

**FEI Number:** 61-1652203

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LABONTE, JAMES M  
51 CAYUGA ROAD  
51 CAYUGA ROAD, FL 33308 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: LABONTE, JAMES M  
Address: 51 CAYUGA ROAD  
City-St-Zip: SEA RANCH LAKES, FL 33308 US

Title: MGRM  
Name: LABONTE, RENEE D  
Address: 51 CAYUGA ROAD  
City-St-Zip: SEA RANCH LAKES, FL 33308 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: JAMES M LABONTE

MGRM

04/29/2012

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