

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000071547

**FILED**  
**Mar 13, 2012**  
**Secretary of State**

**Entity Name:** FE FAYRON, LLC

**Current Principal Place of Business:**

348 WEST BAY DRIVE  
BELLEAIR BLUFFS, 33770 US

**New Principal Place of Business:**

348 WEST BAY DRIVE  
BELLEAIR BLUFFS, FL 33770 US

**Current Mailing Address:**

348 WEST BAY DRIVE  
BELLEAIR BLUFFS, 33770 US

**New Mailing Address:**

348 WEST BAY DRIVE  
BELLEAIR BLUFFS, FL 33770 US

**FEI Number:** 45-2578278

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FLORIDA ASSET PRESERVATION GROUP LLC  
348 WEST BAY DRIVE  
BELLEAIR BLUFFS, FL 33770 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:** MGR  
**Name:** FLORIDA ASSET PRESERVATION GROUP LLC  
**Address:** 348 WEST BAY DRIVE  
**City-St-Zip:** BELLEAIR BLUFFS, FL 33770 US

**Title:** MGRM  
**Name:** DRAWDY, LINDA J  
**Address:** 1501 WILLIAMS ROAD  
**City-St-Zip:** PLANT CITY, FL 33565

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:** LINDA DRAWDY

MGRM

03/13/2012

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