

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L11000074406

Entity Name: IMPRO SYNERGIES LLC

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

8374 ZANZIBAR LANE  
WELLINGTON, FL 33414

**New Principal Place of Business:**

5910 N OCEAN BLVD  
OCEAN RIDGE, FL 33435

**Current Mailing Address:**

8374 ZANZIBAR LANE  
WELLINGTON, FL 33414

**New Mailing Address:**

5910 N OCEAN BLVD  
OCEAN RIDGE, FL 33435

FEI Number: 45-2638446

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CAPLAN, JAMES F  
5910 N OCEAN BLVD  
OCEAN RIDGE, FL 33435 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: CAPLAN, JAMES F  
Address: 5910 N OCEAN BLVD  
City-St-Zip: OCEAN RIDGE, FL 33435 US

Title: MGR  
Name: GUILIANI, MARIANNE L  
Address: 8374 ZANZIBAR LANE  
City-St-Zip: WELLINGTON, FL 33414

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 F CAPLAN

MGR

04/25/2012

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