

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000091061

**FILED**  
**Mar 07, 2012**  
**Secretary of State**

**Entity Name:** 2712 WEST LINDEN AVENUE, LLC

**Current Principal Place of Business:**

700 SOUTH OLIVE AVENUE  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

C/O MEYERS & ASSOCIATE, CPA, PA  
4540 PGA BOULEVARD, SUITE 216  
PALM BEACH GARDENS, FL 33418

**New Mailing Address:**

**FEI Number:** 45-3060917

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MEYERS & ASSOCIATE, CPA, PA  
4540 PGA BOULEVARD  
SUITE 216  
PALM BEACH GARDENS, FL 33418 US

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

MEYERS, GAIL C  
4540 PGA BOULEVARD  
SUITE 216  
PALM BEACH GARDENS, FL 33418 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: GAIL C. MEYERS

03/07/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PETER HALMOS & SONS, INC.  
Address: 700 SOUTH OLIVE AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33401

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: GAIL C. MEYERS

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03/07/2012

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