

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000097038

Entity Name: L&L UNITED ENTERPRISES, LLC

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

7093 BRACKEN LANE  
MELBOURNE, FL 32940

## **New Principal Place of Business:**

1270 N WICKHAM RD.  
SUITE 16 #501  
MELBOURNE, FL 32935

## **Current Mailing Address:**

PO BOX 561203  
ROCKLEDGE, FL 32956

## **New Mailing Address:**

1270 N WICKHAM RD.  
SUITE 16 #501  
MELBOURNE, FL 32935

FEI Number: 45-3065572

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FARMER, WILLIAM L  
7093 BRACKEN LANE  
MELBOURNE, FL 32940 US

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

FARMER, WILLIAM L  
4300 WOOD HAVEN DRIVE  
MELBOURNE, FL 32935 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:

02/09/2012

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FARMER, WILLIAM L  
Address: 4300 WOOD HAVEN DRIVE  
City-St-Zip: MELBOURNE, FL 32935

Title: MGRM  
Name: FAGUE, JENNIFER L  
Address: 4300 WOOD HAVEN DRIVE  
City-St-Zip: MELBOURNE, FL 32935

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: WILLIAM L. FARMER

MGR

02/09/2012

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