2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2012
Secretary of State

DOCUMENT# L11000115667

Entity Name: BRIAN MENDES & ASSOCIATES, LLC

Current Principal Place of Business:

5000 EGGLESTON AVE FRNT
ORLANDO, FL 32804

New Principal Place of Business:

Current Mailing Address:

PO BOX 163171
ALTAMONTE SPRINGS, FL 32716

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MENDES, BRIAN
5000 EGGLESTON AVE FRNT
ORLANDO, FL 32804 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: MENDES, BRIAN
Address: PO BOX 163171
City-St-Zip: ALTAMONTE SPRINGS, FL 32716

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 Statues.

SIGNATURE: BRIAN MENDES MGR 05/01/2012

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