

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000121207

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** MOUNT PLEASANT CAPITAL, LLC

**Current Principal Place of Business:**

4401 N. GULF SHORE BLVD.  
# 902  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

4401 N. GULF SHORE BLVD.  
# 902  
NAPLES, FL 34103

**New Mailing Address:**

1809 NORTH VILLA DRIVE  
GIBSONIA, PA 15044

**FEI Number:** 45-3660201

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PERFECT STORM, LLC  
33086 US HIGHWAY 19 NORTH  
PALM HARBOR, FL 34684 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: RODI, ROBERT N  
Address: 1809 NORTH VILLA DRIVE  
City-St-Zip: GIBSONIA, PA 15044 US

Title: MGR  
Name: RODI, MARINA J  
Address: 1809 NORTH VILLA DRIVE  
City-St-Zip: GIBSONIA, PA 15044 US

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: MARINA J. RODI

MGR

01/05/2012

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