

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000136640

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** STARDANCE FAMILY TRUST, LLC

**Current Principal Place of Business:**

8161 OLD HIGHWAY  
ISLAMORADA, FL 33036

**New Principal Place of Business:**

81681 OLD HIGHWAY  
ISLAMORADA, FL 33036 US

**Current Mailing Address:**

P.O. BOX 1243  
ISLAMORADA, FL 33036 US

**New Mailing Address:**

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

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

BAAD, RANDALL  
89240 OVERSEAS HWY #6  
TAVERNIER, FL 33070 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: MGRM  
Name: ESSLINGER, JOHN S  
Address: 117 SEASHORE DR  
City-St-Zip: ISLAMORADA, FL 33036 US

Title: MGRM  
Name: STANLEY, PATRICIA  
Address: 117 SEASHORE DR  
City-St-Zip: ISLAMORADA, FL 33036 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: JOHN ESSLINGER MGRM 04/30/2012

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