

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000141217

**FILED**  
**Apr 15, 2012**  
**Secretary of State**

**Entity Name:** HAPPY HORSE FARRIER SERVICES AND MOBILE SCALES, LLC

**Current Principal Place of Business:**

8721 BASS LAKE DR  
NEW PORT RICKEY, FL 34652

**New Principal Place of Business:**

**Current Mailing Address:**

8721 BASS LAKE DR  
NEW PORT RICKEY, FL 34652

**New Mailing Address:**

**FEI Number:** 45-4290608

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEPORATTI, ROBERT  
8721 BASS LAKE DR  
NEW PORT RICKEY, FL 34652 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: LEPORATTI, CHERIE  
Address: 8323 TILLET LOOP  
City-St-Zip: MANASSAS, VA 20110

Title: MGRM  
Name: LEPORATTI, ROBERT  
Address: 8721 BASS LAKE DR  
City-St-Zip: NEW PORT RICKEY, FL 34652

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: CHERIE LEPORATTI

MGR

04/15/2012

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