

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000143119

**FILED**  
**Apr 02, 2012**  
**Secretary of State**

**Entity Name:** EAB, L.L.C.

**Current Principal Place of Business:**

13621 PERDIDO KEY DRIVE  
NO. 1702 WEST  
PENSACOLA, FL 32507 US

**New Principal Place of Business:**

**Current Mailing Address:**

5821 RANGELINE ROAD  
SUITE 204  
THEODORE, AL 36582

**New Mailing Address:**

**FEI Number:** 45-4210958

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBERTS, MISTY D  
13621 PERDIDO KEY DRIVE  
NO. 1702 WEST  
PENSACOLA, FL 32507 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:** ROBERTS, MISTY D  
**Address:** 5821 RANGELINE ROAD, SUITE 204  
**City-St-Zip:** THEODORE, AL 36582 US

**Title:** MGRM  
**Name:** BRENNAN, WILLIAM J  
**Address:** 5821 RANGELINE ROAD, SUITE 204  
**City-St-Zip:** THEODORE, AL 36582

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 BRENNAN

MGRM

04/02/2012

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