

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M00000000265

**FILED**  
**Jan 17, 2012**  
**Secretary of State**

**Entity Name:** DE LAGE LANDEN OPERATIONAL SERVICES, LLC

**Current Principal Place of Business:**

111 OLD EAGLE SCHOOL ROAD  
WAYNE, PA 19087

**New Principal Place of Business:**

**Current Mailing Address:**

111 OLD EAGLE SCHOOL ROAD  
WAYNE, PA 19087

**New Mailing Address:**

**FEI Number:** 23-3010982

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** DE LAGE LANDEN FINANCIAL SERVICES, INC  
**Address:** 1111 OLD EAGLE SCHOOL RD  
**City-St-Zip:** WAYNE, PA 19087

**Title:** MGR  
**Name:** DIMARTINO, RITA  
**Address:** 1111 OLD EAGLE SCHOOL RD  
**City-St-Zip:** WAYNE, PA 19087

**Title:** MGR  
**Name:** MCCAFFERTY, DENIS  
**Address:** 1111 OLD EAGLE SCHOOL RD  
**City-St-Zip:** WAYNE, PA 19087

**Title:** TREA  
**Name:** CELOTTO, HENRY TREASUR  
**Address:** 1111 OLD EAGLE SCHOOL RD  
**City-St-Zip:** WAYNE, PA 19087

**Title:** SECR  
**Name:** OCHROCH, PETER SECRETA  
**Address:** 1111 OLD EAGLE SCHOOL RD  
**City-St-Zip:** WAYNE, PA 19087

**Title:** SECR  
**Name:** LIBERATORE, DOMINIC SECRETA  
**Address:** 1111 OLD EAGLE SCHOOL ROAD  
**City-St-Zip:** WAYNE, PA 19087 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:** DOMINIC LIBERATORE

SECR

01/17/2012

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