

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M01000001019

**FILED**  
**Jan 11, 2012**  
**Secretary of State**

**Entity Name:** RAVE LLC

**Current Principal Place of Business:**

430 S. CONGRESS AVENUE, SUITE 7  
DELRAY BEACH, FL 334454619

**New Principal Place of Business:**

**Current Mailing Address:**

430 S. CONGRESS AVENUE, SUITE 7  
DELRAY BEACH, FL 334454619

**New Mailing Address:**

**FEI Number:** 77-0436961

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BRAZZEL, CRYSTAL  
430 S. CONGRESS AVENUE, SUITE 7  
DELRAY BEACH, FL 334454619 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:** GREENE, ALAN K  
**Address:** SUITE 2-B, BROOKE STREET  
**City-St-Zip:** DARIEN, CT 06820

**Title:** MGRM  
**Name:** LUNDY, FRANK E  
**Address:** 1826 ROLLINS ROAD  
**City-St-Zip:** BURLINGAME, CA 94010

**Title:** MGRM  
**Name:** HOPKINS, BARRY  
**Address:** 430 S. CONGRESS AVENUE, SUITE 7  
**City-St-Zip:** DELRAY BEACH, FL 334454619

**Title:** MGRM  
**Name:** WECHSLER & CO., INC.  
**Address:** 105 SOUTH BEDFORD ROAD, SUITE 310  
**City-St-Zip:** MOUNT KISCO, NY 10549

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:** BARRY HOPKINS

CEO

01/11/2012

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