

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M02000002013

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

**Entity Name:** SATURN SOUTHWEST FLORIDA, LLC

**Current Principal Place of Business:**

900 SW PINE ISLAND RD  
116  
CAPE CORAL, FL 339911981 US

**New Principal Place of Business:**

900 SW PINE ISLAND RD  
203  
CAPE CORAL, FL 339911982 US

**Current Mailing Address:**

PO BOX 152118  
CAPE CORAL, FL 339152118 US

**New Mailing Address:**

**FEI Number:** 13-4204780

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GOODMAN, ROBERT H  
900 SW PINE ISLAND RD  
116  
CAPE CORAL, FL 339911981 US

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

GOODMAN, ROBERT H  
900 SW PINE ISLAND RD  
203  
CAPE CORAL, FL 339911982 US

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:

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SATURN HOLDING - FLORIDA, INC.  
Address: 900 SW PINE ISLAND RD # 203  
City-St-Zip: CAPE CORAL, FL 339911982 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: ROBERT H GOODMAN

MGRM

04/30/2012

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