

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000001231

Entity Name: JASON ALLEN, LLC

**FILED**  
**Feb 07, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

7800 UNIVERSITY POINT DRIVE  
400  
FORT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

7800 UNIVERSITY POINT DRIVE  
400  
FORT MYERS, FL 33907

**New Mailing Address:**

FEI Number: 20-0328419

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALLEN, JASON  
7800 UNIVERSITY POINT DRIVE  
400  
FORT MYERS, FL 33907 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: ALLEN, JASON  
Address: 7800 UNIVERSITY POINT DRIVE, SUITE 400  
City-St-Zip: FORT MYERS, FL 33907

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: JASON ALLEN

MR

02/07/2012

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