

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000003983

Entity Name: S AND S BELMONT LLC

**FILED**  
**Jan 12, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

6035 GRAND RIVER DRIVE  
GRAND LEDGE, MI 48837

**New Principal Place of Business:**

**Current Mailing Address:**

6035 GRAND RIVER DRIVE  
GRAND LEDGE, MI 48837

**New Mailing Address:**

FEI Number: 27-2705451

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

INCORP SERVICES, INC  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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: STRACHAN, CAROL  
Address: 6035 GRAND RIVER DRIVE  
City-St-Zip: GRAND LEDGE, MI 48837

Title: MGRM  
Name: STRACHAN, JOHN  
Address: 6035 GRAND RIVER DRIVE  
City-St-Zip: GRAND LEDGE, MI 48837

Title: MGRM  
Name: SHOFFNER, CARRON  
Address: 1800 BELMONT RD NW #3-R  
City-St-Zip: WASHINGTON, DC 20009

Title: MGRM  
Name: SHOFFNER, WILSON A  
Address: 1800 BELMONT RD NW #3-R  
City-St-Zip: WASHINGTON, DC 20009

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: JOHN M. STRACHAN

MGRM

01/12/2012

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