

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000005003

**Entity Name:** FOSSE AT HOME LLC

**FILED**  
**Feb 18, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

17033 SE 115TH TERRACE RD  
SUMMERFIELD, FL 34491

**New Principal Place of Business:**

**Current Mailing Address:**

17033 SE 115TH TERRACE RD  
SUMMERFIELD, FL 34491

**New Mailing Address:**

**FEI Number:** 27-2264714

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

FOSSE, STEVEN  
17033 SE 115TH TERRACE RD  
SUMMERFIELD, FL 34491 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:** FOSSE, STEVEN  
**Address:** 17033 SE 115TH TERRACE RD  
**City-St-Zip:** SUMMERFIELD, FL 34491

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: STEVEN FOSSE

MGRM

02/18/2012

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