

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000006763

Entity Name: 639 SANFORD ST, LLC

FILED  
Apr 30, 2012  
Secretary of State

**Current Principal Place of Business:**

106 SNEAD ROAD  
APT D  
INDIAN HARBOUR BEACH, FL 32937

**New Principal Place of Business:**

2903 W NEW HAVEN  
SUITE 358  
MELBOURNE, FL 32904

**Current Mailing Address:**

106 SNEAD ROAD  
APT D  
INDIAN HARBOUR BEACH, FL 32937

**New Mailing Address:**

2903 W NEW HAVEN  
SUITE 358  
MELBOURNE, FL 32904

FEI Number: 27-5064827

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

PEARSON, SHERRILL  
106 SNEAD ROAD  
APT D  
INDIAN HARBOUR BEACH, FL 32937 US

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

PEARSON, SHERRILL  
2903 W NEW HAVEN  
SUITE 358  
MELBOURNE, FL 32904 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: MGR  
Name: PEARSON, WILLIAM  
Address: 2903 W NEW HAVEN  
City-St-Zip: MELBOURNE, FL 32904

Title: MGR  
Name: PEARSON, SHERRILL  
Address: 2903 W NEW HAVEN  
City-St-Zip: MELBOURNE, FL 32904

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: WILLIAM PEARSON

PRES

04/30/2012

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