

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000002421

**FILED**  
**Mar 27, 2012**  
**Secretary of State**

**Entity Name:** ILLUMINATION LOGISTIC SERVICES LLC

**Current Principal Place of Business:**

5701 E. HILLSBOROUGH AVE.  
SUITE 1130  
TAMPA, FL 33610

**New Principal Place of Business:**

5701 E. HILLSBOROUGH AVE.  
SUITE 1120  
TAMPA, FL 33610

**Current Mailing Address:**

P.O. BOX 7  
LAND O LAKES, FL 34639

**New Mailing Address:**

FEI Number: 01-0881462      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

WILLIAMS, KRISTIE A  
4207 VERNE COURT  
LAND O LAKES, FL 34639      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: WILLIAMS, KRISTIE A  
Address: 4207 VERNE COURT  
City-St-Zip: LAND O LAKES, FL 34639

Title: GMM  
Name: HINST, DONALD R  
Address: 3104 BANYAN HILL LANE  
City-St-Zip: LAND O LAKES, FL 34639

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: KRISTIE WILLIAMS

MGRM

03/27/2012

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