

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000044807

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

**Entity Name:** TOTAL BEVERAGE SOLUTIONS, LLC

**Current Principal Place of Business:**

9655 FLORIDA MINING BLVD W STE 509  
JACKSONVILLE, FL 32257 US

**New Principal Place of Business:**

**Current Mailing Address:**

9655 FLORIDA MINING BLVD W STE 509  
JACKSONVILLE, FL 32257 US

**New Mailing Address:**

**FEI Number:** 27-0198603

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

POLVERINE, ILEAN  
8613 ROYALWOOD DRIVE  
JACKSONVILLE, FL 32256 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:** POLVERINE, JEFFREY S  
**Address:** 8613 ROYALWOOD DRIVE  
**City-St-Zip:** JACKSONVILLE, FL 32256 US

**Title:** MGRM  
**Name:** CHESTNUT, JIMMIE A JR  
**Address:** 4029 WARD ROAD  
**City-St-Zip:** LAKELAND, FL 33810 US

**Title:** MGRM  
**Name:** OLMSTEAD, DAVID M JR  
**Address:** 10349 LAKE SHEEN RESERVE BLVD.  
**City-St-Zip:** ORLANDO, FL 32836 US

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:** JEFF POLVERINE

CEO

01/12/2012

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