

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000017545

**FILED
Jan 05, 2012
Secretary of State**

Entity Name: BAG OF TRICKS PARENTING, LLC

Current Principal Place of Business:

4937 NW 55TH BLVD
COCONUT CREEK, FL 33073

New Principal Place of Business:

Current Mailing Address:

4937 NW 55TH BLVD
COCONUT CREEK, FL 33073

New Mailing Address:

FEI Number: 27-1940410 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WALT, BRIAN
4937 NW 55TH BLVD
COCONUT CREEK, FL 33073 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: WALT, BRIAN
Address: 4937 NW 55TH BLVD
City-St-Zip: COCONUT CREEK, FL 33073

Title: MGRM
Name: WALT, MEREDITH
Address: 4937 NW 55TH BLVD
City-St-Zip: COCONUT CREEK, FL 33073

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: BRIAN WALT MGRM 01/05/2012

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