

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000070166

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

**Entity Name:** ALLIED MARKETING ASSOCIATES, LLC

**Current Principal Place of Business:**

4380 ST. JOHNS PKWY  
SUITE 120  
SANFORD, FL 32771 US

**New Principal Place of Business:**

**Current Mailing Address:**

4380 ST. JOHNS PKWY  
SUITE 120  
SANFORD, FL 32771 US

**New Mailing Address:**

**FEI Number:** 27-2978980

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WILLIS, PATRICK H ESQ.  
4700 MILLENIA BLVD.  
SUITE 175  
ORLANDO, FL 32839 US

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

WILLIS, PATRICK H ESQ.  
121 S. ORANGE AVE.  
SUITE 1500  
ORLANDO, FL 32801-324 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/12/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ADAMS, JOHN S  
Address: 4380 ST. JOHNS PKWY, SUITE 120  
City-St-Zip: SANFORD, FL 32771 US

Title: MGR  
Name: ADAMS, KATHLEEN P  
Address: 4380 ST. JOHNS PKWY, SUITE 120  
City-St-Zip: SANFORD, FL 32771 US

Title: MGR  
Name: TURNER, GEORGE RANDAL  
Address: 4380 ST. JOHNS PKWY, SUITE 120  
City-St-Zip: SANFORD, FL 32771 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: KATHLEEN P. ADAMS

MGR

04/12/2012

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