

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000024853

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** REBECCA KNOWLES PHOTOGRAPHY, LLC

**Current Principal Place of Business:**

911 IOWA AVE  
LYNN HAVEN, FL 32444

**New Principal Place of Business:**

1106 OHIO AVE  
SUITE 4  
LYNN HAVEN, FL 32444

**Current Mailing Address:**

911 IOWA AVE  
LYNN HAVEN, FL 32444 US

**New Mailing Address:**

**FEI Number:** 27-5226828      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

KNOWLES, REBECCA F  
911 IOWA AVE  
LYNN HAVEN, FL 32444 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:** KNOWLES, REBECCA F  
**Address:** 911 IOWA AVE  
**City-St-Zip:** LYNN HAVEN, FL 32444 US

**Title:** MGRM  
**Name:** KNOWLES, KENNETH L  
**Address:** 911 IOWA AVE  
**City-St-Zip:** LYNN HAVEN, FL 32444 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: REBECCA KNOWLES      MGRM      04/11/2012

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