

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000000135

FILED  
May 07, 2012  
Secretary of State

Entity Name: OTOTRONIX, LLC

**Current Principal Place of Business:**

26620 INTERSTATE 45 NORTH  
OAK RIDGE NORTH, TX 77386

**New Principal Place of Business:**

**Current Mailing Address:**

26620 INTERSTATE 45 NORTH  
OAK RIDGE NORTH, TX 77386

**New Mailing Address:**

FEI Number: 32-0276109

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 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: SPEARMAN, BETH  
Address: 26620 INTERSTATE 45 NORTH  
City-St-Zip: OAK RIDGE NORTH, TX 77386

Title: MGRM  
Name: SPEARMAN, BRIAN  
Address: 26620 INTERSTATE 45 NORTH  
City-St-Zip: OAK RIDGE NORTH, TX 77386

Title: MGRM  
Name: INCIPIO, LLC  
Address: 26620 INTERSTATE 45 NORTH  
City-St-Zip: OAK RIDGE NORTH, TX 77386

Title: MGRM  
Name: INTREPID EQUITY, LLC  
Address: 26620 INTERSTATE 45 NORTH  
City-St-Zip: OAK RIDGE NORTH, TX 77386

Title: MGRM  
Name: HOU, ZEZHANG  
Address: 26620 INTERSTATE 45 NORTH  
City-St-Zip: OAK RIDGE NORTH, TX 77386

Title: MGRM  
Name: GLASSCOCK, MICHAEL III  
Address: 26620 INTERSTATE 45 NORTH  
City-St-Zip: OAK RIDGE NORTH, TX 77386

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: ANDREA HUES

ACCT

05/07/2012

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