

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000001475

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

**Entity Name:** ABRAM-LESLIE NEW MEDIA CONSULTING, LLC

**Current Principal Place of Business:**

3025 THOMAS RD.  
TALLAHASSEE, FL 32312

**New Principal Place of Business:**

**Current Mailing Address:**

174 S. O STREET  
UNIT 128  
LINCOLN, CA 95648

**New Mailing Address:**

P O BOX 451823  
SUNRISE, FL 33345

**FEI Number:** 20-1148284

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BOYD, BROD  
3025 THOMAS RD.  
TALLAHASSEE, FL 32312 US

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

BOYD, KARRI  
9350 SUNRISE LAKES BLVD  
#212  
SUNRISE, FL 33322 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: KARRI BOYD

01/12/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BOYD, BRODWICK A  
Address: 3025 THOMAS RD.  
City-St-Zip: TALLAHASSEE, FL 32312

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: BRODWICK BOYD

MGR

01/12/2012

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