

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000009409

**FILED  
Jan 15, 2015  
Secretary of State  
CC4421408654**

**Entity Name:** LIMBITLESS SOLUTIONS INC

**Current Principal Place of Business:**

1325 NORTHGATE CIRCLE  
APT. L103  
OVIEDO, FL 32765

**Current Mailing Address:**

1325 NORTHGATE CIRCLE  
APT. L103  
OVIEDO, FL 32765 US

**FEI Number:** 47-1944657

**Certificate of Status Desired:** No

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

PETRESKY, TYLER N  
1325 NORTHGATE CIRCLE  
APT. L103  
OVIEDO, FL 32765 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 Date

**Officer/Director Detail :**

Title CM, PRES  
Name MANERO, ALBERT  
Address 247 SHADY OAKS CIRCLE  
City-State-Zip: LAKE MARY FL 32746

Title CEO  
Name PETRESKY, TYLER N  
Address 1325 NORTHGATE CIRCLE  
City-State-Zip: OVIEDO FL 32765

Title COO  
Name COURBIN, DOMINIQUE  
Address 2709 ARC DRIVE  
City-State-Zip: OVIEDO FL 32765

Title BM  
Name SPARKMAN, JOHN  
Address 14034 LAUREL CREEK DR.  
City-State-Zip: ORLANDO F 32828

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TYLER PETRESKY CEO 01/15/2015  
\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail Date