

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000073767

**Entity Name:** TOUCH GO SYSTEMS LLC

**Current Principal Place of Business:**

1828 VISTA RIVER DRIVE  
VALRICO, FL 33596

**Current Mailing Address:**

1828 VISTA RIVER DRIVE  
VALRICO, FL 33596

**FEI Number:** 45-2621346

**Certificate of Status Desired:** No

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

SCALLAN, KYLE M  
1828 VISTA RIVER DRIVE  
VALRICO, FL 33596 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

**Authorized Person(s) Detail :**

Title MGRM  
Name SCALLAN, KYLE M  
Address 1828 VISTA RIVER DRIVE  
City-State-Zip: VALRICO FL 33596

Title MGRM  
Name SOLDINGER, SHANE  
Address 792 KATY LANE  
City-State-Zip: HUGER SC 29450

Title MGRM  
Name MOSER, MATTHEW  
Address 2129 CRIMSON LAKE LANE  
City-State-Zip: LEAQUE CITY TX 77573

Title PARTNER 10%  
Name COWAN, KEVIN  
Address 275 FREMONT COUNTY ROAD 277  
City-State-Zip: CANON CITY CO 81212

*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 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KYLE M SCALLAN

MGRM

04/29/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date