

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000157248

**FILED**  
**Jan 22, 2013**  
**Secretary of State**  
**CC3755720031**

**Entity Name:** BRANIER ORTHOPEDIC CUSTOM MOLDED SHOES, INSERTS & BRACES, LLC

**Current Principal Place of Business:**

527 POMEGRANATE AVE  
SEBRING, FL 33870

**Current Mailing Address:**

527 POMEGRANATE AVE  
SEBRING, FL 33870 US

**FEI Number: 46-1584849**

**Certificate of Status Desired: No**

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

KARLSON LAW GROUP, P.A.  
301 DAL HALL BLVD  
LAKE PLACID, FL 33852 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 LANIER, WILLIAM  
Address 14 GRAPE LANE  
City-State-Zip: LAKE PLACID FL 33852

Title SECRETARY  
Name KAREN LANIER  
Address 527 POMEGRANATE AVE  
City-State-Zip: SEBRING FL 33870

*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: WILLIAM LANIER

MGRM

01/22/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date