

**2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L03000010165

**FILED**  
**Aug 10, 2011**  
**Secretary of State****Entity Name:** MINDFREE, LLC**Current Principal Place of Business:**1788 KESWICK ROAD  
ST. AUGUSTINE, FL 32084**New Principal Place of Business:****Current Mailing Address:**1788 KESWICK ROAD  
ST. AUGUSTINE, FL 32084 US**New Mailing Address:**

FEI Number: 14-1878935      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**WRIGHT, LOUISE R  
1788 KESWICK ROAD  
ST. AUGUSTINE, FL 32084 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: WILSON, MICHAEL A  
Address: 1788 KESWICK ROAD  
City-St-Zip: ST. AUGUSTINE, FL 32084 US

Title: MGRM  
Name: WILSON, MICHAEL A JR.  
Address: 7645 VESTAL BLVD, APT 24  
City-St-Zip: NORTH LITTLE ROCK, AR 72113 US

Title: MGRM  
Name: WILSON, JAMES R III  
Address: 1788 KESWICK ROAD  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MGRM  
Name: WILSON, JAMES R IV  
Address: 1788 KESWICK ROAD  
City-St-Zip: ST. AUGUSTINE, FL 32084

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:** MICHAEL A. WILSON

MGRM

08/10/2011

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