

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000024590

**FILED**  
**Mar 14, 2011**  
**Secretary of State**

**Entity Name:** CRITICAL POINT SOLUTIONS, LLC

**Current Principal Place of Business:**

4300 NW 23RD AVE  
STE. 525  
GAINESVILLE, FL 32606 US

**New Principal Place of Business:**

**Current Mailing Address:**

4300 NW 23RD AVE  
STE. 525  
GAINESVILLE, FL 32606 US

**New Mailing Address:**

**FEI Number:** 20-3345918

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALLAUN, ROBERT K  
4300 NW 23RD AVE, STE 525  
GAINESVILLE, FL 32606 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: MGMR  
Name: ALLAUN, ROBERT K  
Address: 4300 NW 23RD AVE, STE 525  
City-St-Zip: GAINESVILLE, FL 32606 US

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: R. KEITH ALLAUN

MGMR

03/14/2011

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