

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098420

FILED  
Jun 11, 2012  
Secretary of State

**Entity Name:** PROVISION TECHNOLOGY SOLUTIONS, LLC

**Current Principal Place of Business:**

45 W CRYSTAL LAKE STREET  
310  
ORLANDO, FL 32806 US

**New Principal Place of Business:**

**Current Mailing Address:**

45 W CRYSTAL LAKE STREET  
310  
ORLANDO, FL 32806 US

**New Mailing Address:**

**FEI Number:** 20-3578377

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PHILLIPS, JOSHUA M OWNER  
45 W CRYSTAL LAKE STREET  
310  
ORLANDO, FL 32806 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: PHILLIPS, JOSHUA M  
Address: 45 W CRYSTAL LAKE STREET  
City-St-Zip: ORLANDO, FL 32806 US

Title: MGRM  
Name: FITZGERALD, III, CHARLES E  
Address: 8348 AMBER OAK DRIVE  
City-St-Zip: ORLANDO, FL 32817

Title: MGRM  
Name: PHILLIPS, BENNY  
Address: 912 ANTELOPE TRAIL  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: MGRM  
Name: PHILLIPS, SHEREE  
Address: 912 ANTELOPE TRAIL  
City-St-Zip: WINTER SPRINGS, FL 32708

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: JOSHUA PHILLIPS

MGRM

06/11/2012

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