

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000102077

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** LIQUID MIND, L.L.C.

**Current Principal Place of Business:**

1995 PENNSYLVANIA AVE.  
ENGLEWOOD, FL 34224

**New Principal Place of Business:**

**Current Mailing Address:**

7075 PLACIDA RD., STE A  
ENGLEWOOD, FL 34224

**New Mailing Address:**

PO BOX 3752  
PLACIDA, FL 33946

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

AULENTI, RICHARD C  
1995 PENNSYLVANIA AVE.  
ENGLEWOOD, FL 34224 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: AULENTI, RICHARD C  
Address: 1995 PENNSYLVANIA AVE.  
City-St-Zip: ENGLEWOOD, FL 34224

Title: MGRM  
Name: MACKIN, CHARLENE A  
Address: 1995 PENNSYLVANIA AVE.  
City-St-Zip: ENGLEWOOD, FL 34224

Title: MGRM  
Name: MACKIN, KEVIN L  
Address: 1995 PENNSYLVANIA AVE.  
City-St-Zip: ENGLEWOOD, FL 34224

Title: MGRM  
Name: JOHNSON, SALLY B  
Address: 1995 PENNSYLVANIA AVE.  
City-St-Zip: ENGLEWOOD, FL 34224

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:** CHARLENE MACKIN

MGRM

04/11/2012

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