

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000000675

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** FINANCIAL INVESTIGATIVE SERVICES, LLC

**Current Principal Place of Business:**

118 SALEM COURT  
SUITE B-1  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 12774  
TALLAHASSEE, FL 32317

**New Mailing Address:**

**FEI Number:** 20-4037549

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRAYSON ACCOUNTING & CONSULTING, P.A  
118 SALEM COURT  
SUITE B  
TALLAHASSEE, FL 32301 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:** GRAYSON, JOHN M  
**Address:** 118 SALEM COURT, SUITE B-1  
**City-St-Zip:** TALLAHASSEE, FL 32301 US

**Title:** MBRM  
**Name:** JAMES, CORNELIA S  
**Address:** 118 SALEM COURT, SUITE B-1  
**City-St-Zip:** TALLAHASSEE, FL 32301 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:** JOHN M. GRAYSON

MGRM

04/30/2012

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