

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L06000056037

**FILED**  
**Feb 17, 2011**  
**Secretary of State**

**Entity Name:** RALLY POINT MANAGEMENT, LLC

**Current Principal Place of Business:**

100 PAMELA ANN DRIVE  
FORT WALTON BEACH, FL 32547

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 67  
GILBERT, AZ 85299 US

**New Mailing Address:**

100 PAMELA ANN DRIVE  
FORT WALTON BEACH, FL 32547

**FEI Number:** 20-4964386

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WARD, MICHAEL R  
100 PAMELA ANN DRIVE  
FORT WALTON BEACH, FL 32547 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: MGR  
Name: 4M ASSOCIATES INC.  
Address: 427 BALLY WAY  
City-St-Zip: NICEVILLE, FL 32578

Title: MGR  
Name: SPECIAL TACTICS SOLUTIONS INC.  
Address: 1918 KADIMA CIRCLE  
City-St-Zip: FORT WALTON BEACH, FL 32547 US

Title: CEO  
Name: CRUTCHFIELD, CHRISTOPHER C  
Address: 100 PAMELA ANN DRIVE  
City-St-Zip: FORT WALTON BEACH, AZ 32547 US

Title: PRES  
Name: WARD, MICHAEL R  
Address: 100 PAMELA ANN DRIVE  
City-St-Zip: FORT WALTON BEACH, FL 32547 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: MICHAEL WARD

PRES

02/17/2011

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