

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000006910

FILED  
Apr 24, 2012  
Secretary of State

Entity Name: BIZWIN, LLC

**Current Principal Place of Business:**

3550 JUSTIN DRIVE  
PALM HAVOR, FL 34685

**New Principal Place of Business:**

**Current Mailing Address:**

3550 JUSTIN DRIVE  
PALM HAVOR, FL 34685

**New Mailing Address:**

FEI Number: 20-8259889

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARQUARDT, J. MATTHEW  
625 COURT STREET, SUITE 625  
CLEARWATER, FL 33756 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: SCHLAPPI, KYLE  
Address: 3550 JUSTIN DRIVE  
City-St-Zip: PALM HAVOR, FL 34685

Title: MGR  
Name: SCHLAPPI, WILLIAM  
Address: 16501 HARPER POND LANE #302  
City-St-Zip: ODESSA, FL 33556

Title: MGR  
Name: SCHLAPPI, BARBARA  
Address: 3550 JUSTIN DRIVE  
City-St-Zip: PALM HAVOR, FL 34685

Title: MGR  
Name: SCHLAPPI, BRENDON  
Address: 3550 JUSTIN DRIVE  
City-St-Zip: PALM HAVOR, FL 34685

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: KYLE SCHLAPPI

MGR

04/24/2012

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