

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000033428

**FILED**  
**Jul 03, 2012**  
**Secretary of State**

**Entity Name:** LIGHTBOX GRAPHICS, LLC

**Current Principal Place of Business:**

8750 PERIMETER PARK BLVD  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

8750 PERIMETER PARK BLVD  
JACKSONVILLE, FL 32216

**New Mailing Address:**

4412 SUMMER HAVEN BLVD S  
JACKSONVILLE, FL 32258

**FEI Number:** 20-8730617

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIMONIC, NICHOLAS  
8750 PERIMETER PARK BLVD  
JACKSONVILLE, FL 32216 US

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

MURPHY, JUSTIN  
4412 SUMMER HAVEN BLVD S  
JACKSONVILLE, FL 32258 US

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: JUSTIN MURPHY

07/03/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MURPHY, JUSTIN  
Address: 4412 SUMMER HAVEN BLVD S  
City-St-Zip: JACKSONVILLE, FL 32258

Title: MGR  
Name: SIMONIC, NICHOLAS  
Address: 8750 PERIMETER PARK BLVD  
City-St-Zip: JACKSONVILLE, FL 32216

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: JUSTIN MURPHY

CEO

07/03/2012

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