

# **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L07000062433

Entity Name: HOME SAFE CARD, LLC

**FILED**  
**Jun 26, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

5126 CAREY ROAD  
TAMPA, FL 336241503 US

**New Principal Place of Business:**

1024 OSOWAW BLVD  
SPRING HILL, FL 34607 US

**Current Mailing Address:**

5126 CAREY ROAD  
TAMPA, FL 336241503 US

**New Mailing Address:**

1024 OSOWAW BLVD  
SPRING HILL, FL 34607 US

FEI Number: 26-0352117

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BOURGUIGNON, JERRY SR  
5126 CAREY ROAD  
TAMPA, FL 336241503 US

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

ANDERSON, PERRY A  
1024 OSOWAW BLVD  
SPRING HILL, FL 34607 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: PERRY A ANDERSON

06/26/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ANDERSON, PERRY A  
Address: 1024 OSOWAW BLVD  
City-St-Zip: SPRING HILL, FL 34607 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: PERRY A ANDERSON

MGRM

06/26/2012

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