

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000066701

Entity Name: 03-22-18, LLC

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

**Current Principal Place of Business:**

9040 TRYFON BOULEVARD  
A-103  
TRINITY, FL 34655

**New Principal Place of Business:**

**Current Mailing Address:**

9040 TRYFON BOULEVARD  
A-103  
TRINITY, FL 34655

**New Mailing Address:**

FEI Number: 56-2669008

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HUSSEY, MELISSA M  
9040 TRYFON BOULEVARD  
A-103  
TRINITY, FL 34655 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: DCEO  
Name: PLANES, WILLIAM  
Address: 9040 TRYFON BOULEVARD, SUITE A-103  
City-St-Zip: TRINITY, FL 34655

Title: DT  
Name: PLANES, REGINA M  
Address: 9040 TRYFON BOULEVARD, SUITE A-103  
City-St-Zip: TRINITY, FL 34655

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: WILLIAM PLANES

DCEO

04/30/2012

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