

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000116364

**FILED**  
**Apr 20, 2012**  
**Secretary of State**

**Entity Name:** LIMITS OFF LLC

**Current Principal Place of Business:**

14286-19 BEACH BLVD #338  
JACKSONVILLE, FL 32250

**New Principal Place of Business:**

12187 BEACH BLVD  
9  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

14286-19 BEACH BLVD #338  
JACKSONVILLE, FL 32250

**New Mailing Address:**

12213 RIDGE FOREST LANE  
JACKSONVILLE, FL 32246

**FEI Number:** 38-3770067

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIMMONS, SR., MICHAEL A  
12213 RIDGE FOREST LANE  
JACKSONVILLE, FL 32246 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:** P  
**Name:** SIMMONS, J SABRINA  
**Address:** 12187 BEACH BLVD #9  
**City-St-Zip:** JACKSONVILLE, FL 32246

**Title:** MGR  
**Name:** SIMMONS, MICHAEL A SR  
**Address:** 12187 BEACH BLVD #9  
**City-St-Zip:** JACKSONVILLE, FL 32246

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:** JUANITA S SIMMONS

P

04/20/2012

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