

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000118514

**FILED**  
**Aug 21, 2012**  
**Secretary of State**

**Entity Name:** MAXIMUM ENTERPRISE INVESTIGATIVE NETWORK, LLC.

**Current Principal Place of Business:**

2121 CORPORATE SQUARE BLVD.  
SUITE 176  
JACKSONVILLE, FL 322161991 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 19582  
JACKSONVILLE, FL 322459582 US

**New Mailing Address:**

**FEI Number:** 26-1469695

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CHAPMAN, JAMES D JR  
2121 CORPORATE SQUARE BLVD.  
SUITE 176  
JACKSONVILLE, FL 322161991 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:** CHAPMAN, JAMES D JR  
**Address:** 2121 CORPORATE BLVD., SUITE 176  
**City-St-Zip:** JACKSONVILLE, FL 322161991 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:** JAMES D CHAPMAN JR

MGR

08/21/2012

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