

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000027500

**FILED**  
**Mar 09, 2011**  
**Secretary of State**

**Entity Name:** PERSPECTIVE PHOTOGRAFIE, LLC.

**Current Principal Place of Business:**

1875 AVONDALE CIRCLE  
JACKSONVILLE, FL 32205 US

**New Principal Place of Business:**

**Current Mailing Address:**

1875 AVONDALE CIRCLE  
JACKSONVILLE, FL 32205 US

**New Mailing Address:**

**FEI Number:** 20-2040905

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GOLDBAUER, ANNE L  
1875 AVONDALE CIRCLE  
JACKSONVILLE, FL 32205 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:** DIR  
**Name:** GOLDBAUER, ANNE L  
**Address:** 1875 AVONDALE CIRCLE  
**City-St-Zip:** JACKSONVILLE, FL 32205 US

**Title:** SEC  
**Name:** WILLIAMS, AARON J  
**Address:** 1875 AVONDALE CIRCLE  
**City-St-Zip:** JACKSONVILLE, FL 32205 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:** ANNE GOLDBAUER

MGRM

03/09/2011

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