

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000044205

**Entity Name:** BANKSMART SOLUTIONS, LLC

**FILED**  
**Jan 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1654 50TH AVE N  
ST PETERSBURG, FL 337142718 US

**New Principal Place of Business:**

**Current Mailing Address:**

1654 50TH AVE N  
ST PETERSBURG, FL 337142718 US

**New Mailing Address:**

**FEI Number:** 26-2549990

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GIOVINCO, IAN S  
2708 W AZEELE STREET  
TAMPA, FL 33609 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:** MGRM  
**Name:** WILKSON, JAMES D  
**Address:** 1654 50TH AVENUE N  
**City-St-Zip:** ST. PETERSBURG, FL 337142718 US

**Title:** MGRM  
**Name:** TROWBRIDGE, BRADLEY S  
**Address:** 4245 CORONADO ROAD  
**City-St-Zip:** ORLANDO, FL 32804

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. WILKSON

MGRM

01/05/2010

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