

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000062534

FILED  
Feb 24, 2012  
Secretary of State

Entity Name: OPERATION PRO-LIFE, LLC

**Current Principal Place of Business:**

1211 OSCEOLA AVE  
LEESBURG, FL 34748

**New Principal Place of Business:**

**Current Mailing Address:**

1211 OSCEOLA AVE  
LEESBURG, FL 34748

**New Mailing Address:**

P.O. BOX 518  
TAVARES, FL 32778

FEI Number: 26-2980089

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SANKO, JAMES  
33141 IRONGATE DR.  
LEESBURG, FL 34788 US

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

SANKO, JAMES  
1211 OSCEOLA AVE.  
LEESBURG, FL 34748 US

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: JAMES SANKO

02/24/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PRES  
Name: WILLIAMS, PATRICK B  
Address: 8357 MCNIE AVE.  
City-St-Zip: SACRAMENTO, CA 95828

Title: TRES  
Name: SANKO, JAMES R  
Address: 1211 OSCEOLA AVE.  
City-St-Zip: LEESBURG, FL 34748

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 SANKO

TRES

02/24/2012

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