

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000004493

**FILED**  
**Apr 06, 2012**  
**Secretary of State**

**Entity Name:** COURT SANCTIONED IMMOBILIZATION LLC

**Current Principal Place of Business:**

1898 SHADOW PINE CT  
OVIEDO, FL 32766

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 621660  
OVIEDO, FL 32762

**New Mailing Address:**

**FEI Number:** 90-0434528

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, BONITA  
1898 SHADOW PINE CT  
OVIEDO, FL 32766 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:** JOHNSON, BONITA  
**Address:** 1898 SHADOW PINE CT  
**City-St-Zip:** OVIEDO, FL 32766

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: BONITA JOHNSON

MGMR

04/06/2012

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