2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 20, 2012
Secretary of State

DOCUMENT# L09000033104

Entity Name: MASK PARTNERS MITIGATION, LLC

Current Principal Place of Business:

12800 UNIVERSITY DRIVE
SUITE 400
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

12800 UNIVERSITY DRIVE
SUITE 400
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

EVANS, DEBORAH MS
12800 UNIVERSITY DRIVE
SUITE 400
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

LAMPITT, KEITH
12800 UNIVERSITY DRIVE
SUITE 400
FORT MYERS, FL 33907 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: KEITH LAMPITT 02/20/2012
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: ROSEN, MICHAEL
Address: 12800 UNIVERSITY DRIVE, SUITE 400
City-St-Zip: FORT MYERS, FL 33907

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 Statues.

SIGNATURE: MICHAEL E ROSEN MGR 02/20/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date