

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000044851

**FILED**  
**Jun 12, 2011**  
**Secretary of State**

**Entity Name:** MASTERMIND SOLUTIONS LLC

**Current Principal Place of Business:**

2404 WOODSTOCK CT  
ST AUGUSTINE, FL 32092 US

**New Principal Place of Business:**

**Current Mailing Address:**

2404 WOODSTOCK CT  
ST AUGUSTINE, FL 32092 US

**New Mailing Address:**

**FEI Number:** 26-4829823      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

THOMAS, THOMAS  
2404 WOODSTOCK CT  
ST AUGUSTINE, FL 32092 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:** MGR  
**Name:** THOMAS, THOMAS  
**Address:** 2404 WOODSTOCK CT  
**City-St-Zip:** ST AUGUSTINE, FL 32092 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: THOMS THOMAS

MGR

06/12/2011

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