

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000045993

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Entity Name:** TWISTED BILLS, LLC

**Current Principal Place of Business:**

1175 GOULD ST  
CLEARWATER, FL 33756

**New Principal Place of Business:**

**Current Mailing Address:**

1175 GOULD ST  
CLEARWATER, FL 33756

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

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

MUNYAN, RALPH W OWNER  
1175 GOULD STREET  
LARGO, FL 33756 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: RM

01/07/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: MUNYAN, RALPH  
Address: 1175 GOULD ST  
City-St-Zip: CLEARWATER, FL 33756

Title: MGR  
Name: MUNYAN, ROBERT  
Address: 1175 GOULD ST  
City-St-Zip: CLEARWATER, FL 33756

Title: MGR  
Name: MUNYAN, DANIEL  
Address: 1175 GOULD ST  
City-St-Zip: CLEARWATER, FL 33756

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: RALPH W. MUNYAN, JR.

P

01/07/2010

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