

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000091265

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** TRAWICK COUNSELING & CONSULTING, LLC

**Current Principal Place of Business:**

1016 SUTOR ROAD  
TALLAHASSEE, FL 32311 US

**New Principal Place of Business:**

**Current Mailing Address:**

1016 SUTOR ROAD  
TALLAHASSEE, FL 32311 US

**New Mailing Address:**

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

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

TRAWICK, EU'STACIA M  
1016 SUTOR ROAD  
TALLAHASSEE, FL 32311 US

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

TRAWICK DIXIE, EU'STACIA M  
1016 SUTOR ROAD  
TALLAHASSEE, FL 32311 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: EU'STACIA M TRAWICK DIXIE

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: TRAWICK DIXIE, EU'STACIA M  
Address: 1016 SUTOR ROAD  
City-St-Zip: TALLAHASSEE, FL 32311 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: EU'STACIA M TRAWICK DIXIE

MGR

04/30/2012

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