

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000112955

Entity Name: PANHEADS PIZZERIA LLC

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

**Current Principal Place of Business:**

113 S ORANGE ST  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

821 OAKVIEW DR  
NEW SMYRNA BEACH, FL 32169

**New Mailing Address:**

FEI Number: 27-1384269

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ENGLES, FELICIA N FELICIA  
821 OAKVIEW DR  
NEW SMYRNA BEACH, FL 32169 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: ENGLES, FELICIA N  
Address: 821 OAKVIEW DR  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: MGRM  
Name: ENGLES, JESSE M  
Address: 821 OAKVIEW DR  
City-St-Zip: NEW SMYRNA BEACH, FL 32169 FL

Title: MGRM  
Name: ROSS, ERIC J  
Address: 2507 SAXON DR  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: MGRM  
Name: ROSS, CAROLINE  
Address: 2507 SAXON DR  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

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: FELICIA ENLGES

MGRM

04/30/2012

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