

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000122314

**FILED**  
**Feb 24, 2012**  
**Secretary of State**

**Entity Name:** CONCENTRIC COMPUTER CONSULTING LLC

**Current Principal Place of Business:**

491 NORTHEAST SOLIDA CIRCLE  
PORT SAINT LUCIE, FL 34983

**New Principal Place of Business:**

**Current Mailing Address:**

491 NORTHEAST SOLIDA CIRCLE  
PORT SAINT LUCIE, FL 34983

**New Mailing Address:**

**FEI Number:** 27-1555307

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRECHBILL, MARK  
215 SW FEDERAL HWY  
STE 100  
STUART, FL 34994 US

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

VOLLMANN, WILLIAM  
491 NORTHEAST SOLIDA CIRCLE  
PORT SAINT LUCIE, FL 34983 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: WILLIAM VOLLMANN

02/24/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: CONCENTRIC CIRCLES HOLDING, LLC  
Address: 491 NORTHEAST SOLIDA CIRCLE  
City-St-Zip: PORT SAINT LUCIE, FL 34983

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: WILLIAM VOLLMANN

MGR

02/24/2012

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