

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000000954

**FILED**  
**Apr 17, 2011**  
**Secretary of State**

**Entity Name:** FULL IMPACT SPORTS, LLC

**Current Principal Place of Business:**

20303 N US HIGHWAY 441  
SUITE 112-4  
HIGH SPRINGS, FL 32643 US

**New Principal Place of Business:**

**Current Mailing Address:**

20303 N US HIGHWAY 441  
SUITE 112-4  
HIGH SPRINGS, FL 32643 US

**New Mailing Address:**

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

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

BOWEN, ROBERT W  
20303 N US HIGHWAY 441  
SUITE 112-4  
HIGH SPRINGS, FL 32643 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: BOWEN, ROBERT W  
Address: 14621 NW 41ST AVE.  
City-St-Zip: NEWBERRY, FL 32669 US

Title: MGRM  
Name: FINDLEY, FREDRICK E JR.  
Address: 4720 NW 166TH AVE.  
City-St-Zip: GAINESVILLE, FL 32653 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: ROBERT W BOWEN

MGMR

04/17/2011

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