

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000017724

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** FLORIDA BUSINESS SOFTWARE SOLUTIONS, LLC

**Current Principal Place of Business:**

25400 US 19 NORTH  
SUITE 211  
CLEARWATER, FL 33763

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 16868  
CLEARWATER, FL 33766

**New Mailing Address:**

**FEI Number:** 27-1910569

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

EWING, DONALD F JR.  
25400 US 19 NORTH  
SUITE 211  
CLEARWATER, FL 33763 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:** EWING, DONALD F JR.  
**Address:** 25400 US 19 NORTH, SUITE 211  
**City-St-Zip:** CLEARWATER, FL 33763

**Title:** MGRM  
**Name:** EWING, DEENA J  
**Address:** 25400 US 19 NORTH, SUITE 211  
**City-St-Zip:** CLEARWATER, FL 33763

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:** DONALD F. EWING, JR.

MGRM

01/04/2012

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