

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000021857

**Entity Name:** DUOLIT PUBLISHING, LLC

**FILED**  
**Feb 28, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

4252 WICKS BRANCH RD.  
ST. AUGUSTINE, FL 32086 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 861011  
ST. AUGUSTINE, FL 32086 US

**New Mailing Address:**

4252 WICKS BRANCH RD.  
ST. AUGUSTINE, FL 32086 US

**FEI Number:** 27-2328585

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

O'NEIL, SHANNON  
380 PONCE HARBOR DRIVE  
205  
ST. AUGUSTINE, FL 32086 US

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

O'NEIL, SHANNON  
130 MAGNOLIA CROSSING PT  
UNIT 2206  
ST. AUGUSTINE, FL 32086 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:

02/28/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HUFFMAN, TONI T  
Address: 4252 WICKS BRANCH RD.  
City-St-Zip: ST. AUGUSTINE, FL 32086 US

Title: MGRM  
Name: O'NEIL, SHANNON  
Address: 4252 WICKS BRANCH RD.  
City-St-Zip: ST. AUGUSTINE, FL 32086 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: TONI T HUFFMAN

MGRM

02/28/2012

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