

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000044840

**FILED**  
**Apr 22, 2012**  
**Secretary of State**

**Entity Name:** OUR TROUBLE FREE TAX SERVICE, LLC

**Current Principal Place of Business:**

4443 54TH AVENUE N  
ST PETERSBURG, FL 33714 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 49270  
ST PETERSBURG, FL 33743 US

**New Mailing Address:**

**FEI Number:** 27-2476008      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

FRIDY, ANITA MARIE MRS  
250 61ST STREET N  
ST PETERSBURG, FL 33710 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:** FRIDY, ANITA MARIE MRS  
**Address:** 250 61ST STREET N  
**City-St-Zip:** ST PETERSBURG, FL 33710 US

**Title:** MGR  
**Name:** FRIDY, WARREN EDWARD JR  
**Address:** 250 61ST STREET N  
**City-St-Zip:** ST PETERSBURG, FL 33710 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:** ANITA MARIE FRIDY

MGRM

04/22/2012

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