

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000069746

FILED
May 04, 2012
Secretary of State

Entity Name: ADVANCED IDENTITY PROTECTION SERVICES LLC

Current Principal Place of Business:

6529 HIGHCROFT DR.
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

6529 HIGHCROFT DR.
NAPLES, FL 34119

New Mailing Address:

FEI Number: 27-2955826

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WESSON, GUY L
6529 HIGHCROFT DR.
NAPLES, FL 34119 US

Name and Address of New Registered Agent:

WESSON, DEBORAH K
6529 HIGHCROFT DR.
NAPLES, FL 34119 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: DEBORAH K WESSON

05/04/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MR.
Name: SOPER, RUSSEL C
Address: 2313 CAMPESTRE TERRACE
City-St-Zip: NAPLES, FL 34119

Title: MRS.
Name: WESSON, DEBORAH K
Address: 3529 HIGHCROFT DRIVE
City-St-Zip: NAPLES, FL 34119

Title: MR.
Name: WESSON, BRYAN L
Address: 6529 HIGHCROFT DRIVE
City-St-Zip: NAPLES, FL 34119

Title: MS
Name: WESSON, KATHERINE L
Address: 6529 HIGHCROFT DRIVE
City-St-Zip: NAPLES, FL 34119

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: SKIP SOPER

MGR.

05/04/2012

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