

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000086359

**FILED**  
**Feb 14, 2011**  
**Secretary of State**

**Entity Name:** FORENSIC INNOVATION CENTER, LLC

**Current Principal Place of Business:**

7935 114TH AVE., N.  
LARGO, FL 33773

**New Principal Place of Business:**

**Current Mailing Address:**

7935 114TH AVE., N.  
LARGO, FL 33773

**New Mailing Address:**

**FEI Number:** 27-3288393

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LOTHRIDGE, KEVIN L  
7935 114TH AVE NORTH  
LARGO, FL 33773 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:** P  
**Name:** LOTHRIDGE, KEVIN L  
**Address:** 7881 114TH AVE N  
**City-St-Zip:** LARGO, FL 33773

**Title:** S  
**Name:** ASHTON, GARRY  
**Address:** 1340 N GREAT NECK ROAD, #1272-146  
**City-St-Zip:** VIRGINIA BEACH, VA 23454

**Title:** VP  
**Name:** PINCHIN, RICHARD  
**Address:** 7935 114TH AVE N  
**City-St-Zip:** LARGO, FL 33773

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:** KEVIN L LOTHRIDGE

CEO

02/14/2011

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