

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000107583

**FILED**  
**Apr 18, 2012**  
**Secretary of State**

**Entity Name:** PROFESSIONAL IMAGING ENTERPRISES, LLC

**Current Principal Place of Business:**

3513 PIONEER TRAILS BLVD EAST  
LAKELAND, FL 33810

**New Principal Place of Business:**

**Current Mailing Address:**

3513 PIONEER TRAILS BLVD EAST  
LAKELAND, FL 33810

**New Mailing Address:**

**FEI Number:** 27-3698557

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ADDISON, BETTY J  
519 NW 60TH STREET, STE A  
GAINESVILLE, FL 32607 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:** VARNADOE, LESLIE  
**Address:** 4407 HORSESHOE PICK LANE  
**City-St-Zip:** VALRICO, FL 33594

**Title:** MGRM  
**Name:** BRAUN, JAMES  
**Address:** 3513 PIONEER TRAILS BLVD, EAST  
**City-St-Zip:** LAKELAND, FL 33810

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:** JAMES BRAUN

MGRM

04/18/2012

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