

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000114154

**FILED**  
**Mar 30, 2012**  
**Secretary of State**

**Entity Name:** TRUE WAY MARTIAL ARTS, LLC

**Current Principal Place of Business:**

34294 US HWY 19 N  
PALM HARBOR, FL 34684

**New Principal Place of Business:**

34238 US HWY 19 N  
PALM HARBOR, FL 34684

**Current Mailing Address:**

34294 US HWY 19 N  
PALM HARBOR, FL 34684

**New Mailing Address:**

34238 US HWY 19 N  
PALM HARBOR, FL 34684

**FEI Number:** 37-1614904

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOHNSON, CHAD  
2056 GROVELAND ROAD  
PALM HARBOR, FL 34683 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:** JOHNSON, CHAD  
**Address:** 2056 GROVELAND ROAD  
**City-St-Zip:** PALM HARBOR, FL 34683

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:** CHAD RYAN JOHNSON

MGRM

03/30/2012

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