

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000128256

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

**Entity Name:** HEATHBAR INNOVATIONS, LLC

**Current Principal Place of Business:**

693 N LONGVIEW PLACE  
LONGWOOD, FL 32779 US

**New Principal Place of Business:**

**Current Mailing Address:**

693 N LONGVIEW PLACE  
LONGWOOD, FL 32779 US

**New Mailing Address:**

P.O. BOX 915113  
LONGWOOD, FL 32791 US

**FEI Number:** 27-4303192

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SCONNELLY, HEATHER M  
693 N LONGVIEW PLACE  
LONGWOOD, FL 32779 US

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

SCONNELLY, HEATHER M  
363 4TH AVE S  
ST. PETERSBURG, FL 33701 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: HEATHER SCONNELLY

04/29/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SCONNELLY, HEATHER M  
Address: 363 4TH AVE S  
City-St-Zip: ST. PETERSBURG, FL 33701

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: HEATHER SCONNELLY

MGRM

04/29/2012

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