

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000132359

**FILED**  
**Jan 05, 2012**  
**Secretary of State**

**Entity Name:** CALLTIME AUDIO VISUAL LLC

**Current Principal Place of Business:**

1410 SOUTH NARCCOSSEE RD.  
ST. CLOUD, FL 34771 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 700398  
ST. CLOUD, FL 347700398

**New Mailing Address:**

**FEI Number:** 27-4408361

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CAMPBELL, TRAVIS L  
3054 RISING MIST CT  
KISSIMMEE, FL 34744 US

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

CAMPBELL, TRAVIS L  
4610 CYPRESS RIVER RD  
SAINT CLOUD, FL 34772 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:

01/05/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CAMPBELL, TRAVIS L  
Address: 4610 CYPRESS RIVER RD  
City-St-Zip: SAINT CLOUD, FL 34772 US

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: TRAVIS CAMPBELL

MGRM

01/05/2012

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