

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000011654

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

**Entity Name:** PROFESSIONAL BIG PLUG REPAIR, LLC

**Current Principal Place of Business:**

3380 AGRICULTURAL CENTER DRIVE  
ST. AUGUSTINE, FL 32092

**New Principal Place of Business:**

**Current Mailing Address:**

3380 AGRICULTURAL CENTER DRIVE  
ST. AUGUSTINE, FL 32092

**New Mailing Address:**

**FEI Number:** 27-4844335

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CARROLL, THOMAS P  
12412-101 SAN JOSE BLVD  
JACKSONVILLE, FL 32223 US

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

CARROLL, THOMAS P  
315 S OCEAN GRANDE DRIVE, UNIT #306  
PONTE VEDRA BEACH, FL 32082 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: THOMAS CARROLL

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FENIMORE, RYAN  
Address: 3380 AGRICULTURAL CENTER DRIVE  
City-St-Zip: ST. AUGUSTINE, FL 32092

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: RYAN FENIMORE

MGR

04/30/2012

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