

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000017977

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

**Entity Name:** ARMED FORCES BENEFITS NETWORK, LLC

**Current Principal Place of Business:**

6130 EAST HIGHWAY 98  
PANAMA CITY, FL 32404

**New Principal Place of Business:**

**Current Mailing Address:**

6130 EAST HIGHWAY 98  
PANAMA CITY, FL 32404

**New Mailing Address:**

**FEI Number:** 27-5040478

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MILLER, MARY E  
6130 EAST HIGHWAY 98  
PANAMA CITY, FL 32404 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:** MGR  
**Name:** MILLER, MARY E  
**Address:** 6130 EAST HIGHWAY 98  
**City-St-Zip:** PANAMA CITY, FL 32404

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: MARY E. MILLER, RFP, RFC

MGR

01/05/2012

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