

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000028059

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** YANT BUSINESS SOLUTIONS, LLC

**Current Principal Place of Business:**

5620 WESTVIEW LANE  
TALLAHASSEE, FL 32310

**New Principal Place of Business:**

1044 SEMINOLE DRIVE  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

PO BOX 2331  
TALLAHASSEE, FL 32316

**New Mailing Address:**

**FEI Number:** 27-5370995

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOLLAND, MIA B  
2103 NE 12TH AVENUE  
GAINESVILLE, FL 32641 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:** MMGR  
**Name:** YANT, ROBYN P  
**Address:** 1044 SEMINOLE DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32301

**Title:** MGR  
**Name:** YANT, LA'MICAH C  
**Address:** 1044 SEMINOLE DRIVE  
**City-St-Zip:** TALLAHASSEE, FL 32301

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:** ROBYN YANT

MMBR

04/10/2012

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