

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000033727

**FILED**  
**Apr 28, 2012**  
**Secretary of State**

**Entity Name:** EPITOMIZE ENTERTAINMENT INITIATIVE, LLC

**Current Principal Place of Business:**

5764 NORTH ORANGE BLOSSOM TRAIL  
137  
ORLANDO, FL., 32810

**New Principal Place of Business:**

5764 NORTH ORANGE BLOSSOM TRAIL  
137  
ORLANDO,, FL 32810

**Current Mailing Address:**

5764 NORTH ORANGE BLOSSOM TRAIL  
137  
ORLANDO, FL., 32810

**New Mailing Address:**

5764 NORTH ORANGE BLOSSOM TRAIL  
137  
ORLANDO,, FL 32810

**FEI Number:** 45-0823403

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SIMS, ARTHUR D ESQUIRE  
7512 DR PHILLIPS BLVD.  
SUITE 50-303  
ORLANDO, FL 32819 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:** CAMPBELL, ANTONIO H  
**Address:** 4491 LEMANS DRIVE  
**City-St-Zip:** ORLANDO,, FL 32808 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:** ANTONIO CAMPBELL

MGR

04/28/2012

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